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A 4-year demonstration project at Indianapolis Goodwill Industries applied work adjustment knowledge, methods, and techniques to assist 200 clients, ages 17 to 58 years, mean IQ 90, who were severely disabled with handicaps including mental retardation, epilepsy, emotional disturbance, and/or physical handicaps. After a diagnostic evaluation clients were assigned to a job; supervisors, caseworkers, and psychologists provided support or criticism directed toward shaping work attitudes and helping the person see himself realistically. Evaluation techniques considered interpersonal relations, utilization of ability, work satisfaction, adjustment to work pressure, and self concept as a worker. Supervisors and other staff members also rated workers for employability and placeability; followup studies were done. Of the 159 clients who completed the program, 129 were placed on jobs. Conclusions were that techniques used in the project were practical and effective for the majority of clients and that clients tended to show better adjustment. Administrative problems, the role of supervisors, and implications for the future are discussed; six case histories, 29 tables of information about clients, and 11 forms and rating scales are included. (RK)

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A WORK ADJUSTMENT PROGRAM FOR DISABLED PERSONS WITH EMOTIONAL PROBLEMS

A PROJECT OF THE
INDIANAPOLIS GOODWILL INDUSTRIES

- **Howard G. Lytle,**
  Executive Director
- **Paul Schmidt,**
  Project Director

EC003435

WORK ADJUSTMENT PROGRAM FOR DISABLED PERSONS WITH EMOTIONAL PROBLEMS

by

Paul Schmidt, Ethelwyne Arnholter and Marion Warner

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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A Demonstration Project (No. RD 275) made possible by a four-year grant from the United States Department of Health, Education and Welfare, Office of Vocational Rehabilitation.

Indianapolis Goodwill Industries, final report, August 15, 1962.

Foreward

Emotional factors constitute a major barrier in the rehabilitation of the handicapped. Often the major consideration, emotional problems almost always accompany other types of disability as a secondary but equally damaging handicap.

The project reported here presents a clear picture of this fact as it relates to employment. It also demonstrates the possibilities inherent in the work-oriented center for providing a work adjustment program capable of helping many emotionally handicapped individuals return to a position of self-sufficiency. Any investigation and/or demonstration that provides additional information which will help the handicapped individual develop work tolerance is of great significance to the total rehabilitation process.

Those persons responsible are to be congratulated on the successful completion of this project, the findings of which will be most helpful to others in continuing the improvement of rehabilitation techniques.

Neal E. Baxter, M.D., Chairman
Indiana Commission for the Handicapped

Foreward

Research has become an ever increasing factor in modern life. Business and industry depend upon it for progress and it is responsible for the ever-changing pattern of our daily lives.

A prime local example is the Five Hundred Mile Race at the local Speedway, known all over the world as the proving ground for new ideas and advancements in the automobile.

In many ways research in other fields is more simple because it deals with more tangible things. Research in the area discussed by this study is more difficult because it deals with people and their problems.

To those who have spent long hours of effort and given their best thought to this study, those in the great field of rehabilitation are indebted. It is our hope that their findings will be useful and that their labors shall not have been in vain.

Gayle S. Eads, Director
Indiana Division of Vocational
Rehabilitation

Acknowledgements

The interest, cooperation and assistance of many individuals and public and private agencies have made possible this demonstration and its accomplishments.

Sincere appreciation is extended to Mary Switzer, Director, Office of Vocational Rehabilitation, United States Department of Health, Education and Welfare, and her staff; Stanley Hedstrom, Regional Director, Office of Vocational Rehabilitation; Gayle S. Eads, Director, Indiana Division of Vocational Rehabilitation; Dr. S. T. Ginsberg, Indiana Commissioner of Mental Health; William Gellman, Director, Chicago Jewish Vocational and Employment Service, and staff; Howard Gustafson, Executive Director, Community Service Council of Metropolitan Indianapolis, Inc.; Dr. A. C. Offut, Commissioner, Indiana State Board of Health; Dr. Earl W. Mericle, Chairman, Professional Advisory Committee, Indiana Association for Mental Health; Richard James, Past President, Indiana Association for Mental Health; and the Advisory Committee on Rehabilitation, Community Service Council of Metropolitan Indianapolis.

The cooperation and support of the members of the non-project staff of Indianapolis Goodwill Industries; the faithful performance of the Indianapolis project staff; and the keen interest and wise counsel of the advisory committee to the Indianapolis Goodwill Industries, the Executive and the Board of Directors, have been of special meaning and encouragement.

Paul Schmidt,
Project Director

PREFACE

This monograph presents the final report of a four year demonstration project, "Work Adjustment Program for Disabled Persons with Emotional Problems", from April 1st, 1958, to March 31st, 1962, under a grant from the Office of Vocational Rehabilitation, United States Department of Health, Education and Welfare. The grant was awarded for the purpose of putting to practical application the knowledge, methods and techniques of work adjustment developed by a prototype research project, "Vocational Adjustment Center for Disabled Persons with Emotional Problems", (12) conducted by the Jewish Vocational Service and Employment Center of Chicago, Illinois.

Secondary goals of the demonstration were: (1) to explore the value and feasibility of the new methods and techniques of work adjustment for adaptation to the Goodwill Industries total program; (2) to integrate the project staff members and the special services and techniques of the demonstration into the on-going Goodwill Industries' structure, if the demonstration would be proven to be effective; (3) to determine the effectiveness of industrial supervisors without high level educational backgrounds, unlike the supervisors of the prototype program, who were trained counselors with college degrees.

In the diversified industrial shops of the Goodwill Industries, the demonstration project was conducted as a separate unit in the sub-contract division, with a staff separate from the Industries' staff. Members of the project staff were: Paul Schmidt, project director; Ethelwyne Arnholter, Ph.D., psychologist; Marion Warner, M.A., caseworker; James Kemper and Robert Essex, industrial supervisors; Thomas Baldwin, job placement counselor; Leo Loughlin, M.D., psychiatric consultant; and Frances Enlow, secretary. Supporting cooperative services were also provided by Dr. Myron Dill, Medical Director, Mrs. Margaret Foster, personnel director;

Philip Neidlinger, intake director; Maurine Miller, Ph. D., chief of psychological services; Mrs. Pauline Barrett and Mrs. Doris Bryant, industrial nurses; Bernard Lubin, Ph. D., psychologist; and Harry Brittain, statistician.

The combined efforts of the project staff were directed as a team to the development of adequate work personality in the clients through:

(a) Modification of attitudes toward work which hindered vocational adjustment.

(b) Training in acceptable work habits.

(c) Adjustment to shop routines and work pressures.

(d) Increased motivation to work.

(e) Perception of self realistically as a worker.

(f) Acquisition of abilities to utilize potentials and vocational attributes in gainful employment.

The ultimate goal for each client on completion of training was placement in gainful employment.

COMMUNITY RELATIONSHIP AND PUBLIC EDUCATION

Role of the Indiana Division of Vocational Rehabilitation

The Indiana Division of Vocational Rehabilitation recognized the need for the intensive type of adjustment training for disabled persons with emotional problems which this Office of Vocational Rehabilitation Project Grant Program would provide. It assisted the Indianapolis Goodwill Industries in applying for the grant and endorsed the grant application.

Division of Vocational Rehabilitation counselor, John Price, was assigned to serve as liaison to attend weekly case conferences and to participate in admission discussions and progress reviews of clients. Client progress reports were sent regularly to the Indiana Division of Vocational Rehabilitation.

Thirty percent of the clients admitted to the project were referred by the Division of Vocational Rehabilitation. Without the continuing cooperation of the Indiana Division of Vocational Rehabilitation since the inception of the program, this demonstration could not have been possible.

Community Relationships

Endorsement of the application for the Project grant was given by Dr. T.S. Ginsberg, Commissioner of the Indiana Division of Mental Health, the Community Service Council of Metropolitan Indianapolis, and other leaders in the community.

Evidence of the need in the community for the program had been published in a report, "Measuring a Community", (11) after a comprehensive survey of rehabilitation facilities in Marion County, which contained this specific recommendation:

> "The Indianapolis Goodwill Industries should expand its services in the area of vocational evaluation, vocational training, work therapy and placement, and follow-up."

During the first grant year the Indiana Association of Mental Health gave a grant of seven thousand five hundred dollars as a part of the needed local money to meet the requirements of the grant. Acknowledgement is hereby made to the Mental Health Association for this grant, as an important contribution to the success of the program.

Public Information

The effort to keep the community informed of the development and progress of the demonstration was continuous. Bulletins of the Mental Health Associations, the Community Service Council of Metropolitan Indianapolis, the Division of Vocational Rehabilitation, the Indianapolis Church Federation, and the State Board of Health, publicized the project. Announcements were circulated to member agencies of the Community Service Council, to private physicians, to high school principals, to hospital administrators, and to social service departments of hospitals, describing the purpose of the demonstration, the criteria for intake, and referral methods. A descriptive brochure of the Indianapolis Goodwill Industries was included.

Local newspapers described the launching of the project. The New York Times featured an Associated Press release about the first group of project clients. Progress of the demonstration was covered periodically by the newspapers. The Indiana State Board of Health Bulletin in July, 1960, printed an article on the demonstration based on a paper presented by the project psychologist at the World Federation of Mental Health meeting in Edinburgh, Scotland, in August, 1960.

Members of the project staff appeared on television and radio programs and spoke before professional and lay groups to explain the unique service of the program. The following list names the various groups to whom the staff members spoke:

> Indianapolis Association of Personnel Women; Indianapolis Council of Women; Parent-Teachers Associations; church groups; Association for the Mentally Retarded; Association for Parents of Exceptional Children; Butler University psychology classes; social science classes in the Indianapolis high schools; Women's Department Club; Sertoma Club; The Community Service Council; Marion County Advisory Committee on Rehabilitation; Family Service Association; staff members of Marion County Department of Public Welfare; Indiana State Conference on Social Work; Women's Press Club; Optimist Club; Rotary Club; special education teachers of the city schools; Junior

Chamber of Commerce; American Business Women's Association; Indiana Federation of Women's Clubs; Northeast Business Men's Association; Homemakers' Clubs and undergraduate and graduate students from schools of nursing at Indiana University, Goshen College, St. Mary's Hospital, St. Vincent's Hospital, Methodist Hospital, Depauw University and Indiana Central College; occupational therapists, physical therapists, psychiatric internes and psychology internes of Indiana University School of Medicine.

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CHAPTER I

ORGANIZATION OF THE DEMONSTRATION PROJECT

The Goodwill Movement

The Goodwill Industries movement, launched during an economic depression in Boston, Massachusetts, in 1902, expanded to one hundred and twenty-five cities in the United States and in eight foreign countries, with a total of one hundred and forty-three centers today.

The traditional operation of collecting, reconditioning and selling donated, discarded materials to provide training and employment for handicapped persons has remained the primary function of the Goodwill movement. The original philosophy of viewing the centers as sheltered workshops for terminal workers only, was replaced by a concept of comprehensive rehabilitative services, by which handicapped workers were prepared for eventual placement in competitive industry. While community needs and resources and geographical location have determined the size of plants and the range of services of each Goodwill Industries, the development of total rehabilitation programs has been intensified in many of the centers.

The Indianapolis Goodwill Industries

The Indianapolis Goodwill Industries has grown rapidly since its beginning in an old garage in 1929. Today it employs three hundred and fifty persons daily and its workshops are housed in a new, modern building, constructed and equipped to meet the special needs of handicapped workers. Collection centers extend over the State of Indiana for a radius of sixty miles. The collected materials are restored and sold in eight retail stores.

The Indianapolis Goodwill Industries was one of the early centers to develop a comprehensive vocational rehabilitation program. It was the first to employ a psychologist, who has been in continuous employment for more than fifteen years.

Wages paid to workers have been within the Federal Wage and Hour Law regulations. Fringe benefits include paid vacations and life insurance. A corps of women who donate volunteer time, and members of the staff, have sponsored religious and recreational programs for the employees.

Community agencies contract for training of workers in three special rehabilitation sequences: (1) a four-week experience on numerous trials on different jobs, titled "Vocational Evaluation"; (2) a work therapy program for persons lacking emotional and physical tolerance for work, titled "Work Adjustment"; and (3) extended training on a specific job, titled "Vocational Training".

The shop has training programs in the following fields:

Sales clerk
Steam presser
Dry cleaner operator
Laundry
Clothing repair
Janitorial
Cafeteria
Medical secretarial
Furniture finish
Inspection

Private switchboard operation
Offset printing
General office
Electrical appliance repair
Upholstery
Furniture repair
Shoe repair
Spray painter
Light assemblies
Toy and bicycle repair

Setting of the Demonstration Project

The sub-contract division of the Goodwill plant was designated as the work area for the demonstration, although the project functioned as a separate unit from the regular contract division with a staff assigned exclusively to the program.

Dependent upon the immediate contract order, clients were assigned to such repetitive tasks as packaging, labeling, envelope stuffing, collating, mailing, inspection, and light assemblies. Scheduled for twelve weeks of work experience, they reported five days a week, six hours a day. In instances when their adjustment would best be effected, clients with previous experience in clerical, accounting, and other kinds of semi-skilled and skilled work were placed in areas of the plant where they could be tried on such jobs.

The majority of the clients completed the entire twelve week program, although some were terminated sooner and a few were extended. Termination before the end of the twelve weeks was in instances where a client was unable to benefit; was in need of non-vocational treatment; or withdrew to marry or take an outside job. The clients who were continued beyond the twelve weeks were viewed as requiring additional adjustment to be ready for placement.

The Project Staff

The Demonstration Project was initiated on April 1, 1958, with a staff comprised of the project director, a clinical psychologist, three industrial supervisors and a secretary. A part-time caseworker was employed in July of 1958, on a three-day-a-week schedule.

The ratio of clients to supervisors was six to one until January, 1959, when the maximum load of clients was decreased from eighteen to fourteen and the number of supervisors was decreased from three to two. The ratio of seven workers to one supervisor remained constant throughout the remainder of the program. This reduction in the number of clients prevented overload in the workshop operation, particularly when project clients were placed in the plant in production departments because of work stoppage in the contract division.

During the third project year the social worker was scheduled to work five days a week to provide an expanded and more intensive casework service. The placement counselor was employed on March 7, 1960, to increase job placements of clients. The efficacy of this staff addition is supported by a one hundred and eleven percent increase in the number of clients placed after the placement counselor was employed.

The psychiatrist was added in January, 1961, on a two-hour per week consulting basis, and the psychologist's week was reduced to four, instead of five days a week.

Staff Training and Development of the Team Concept

Plant financed courses in university extension classes were provided for the supervisors who had had considerable experience in supervision and some college work in industrial psychology and supervisory techniques. Supervisors attended a seminar led by the psychologist, dealing with the dynamics of behavior and personality development, with emphasis on personality problems of the handicapped. The training director instructed them in the history, philosophy and purpose of Goodwill Industries, the principles of rehabilitation and the role of the sheltered workshop in rehabilitation.

The project supervisors attended routine supervisory training sessions for all plant supervisors. These sessions focused on: (1) functions and responsibilities of supervisors; (2) job instruction training; (3) human relations; (4) work simplification; (5) job-layout; (6) planning the work; (7) work analysis; (8) leadership; (9) general plant policies and procedures; (10) safety training; (11) cost control; (12) merit ratings; (13) techniques for evaluation of worker performance; and (14) delegation of responsibility.

The project staff members met once a week to share learnings, exchange information about the clients, and to determine "treatment prescriptions". This in-service training presented new challenges unlike past experiences of some of the members of the staff and made demands for creative use of their professional skills.

The Client Population

Two hundred persons entered the program; one hundred thirty-three, or sixty-seven percent, males; and sixty-seven, or thirty-three percent, females. The age range was from seventeen to fifty-eight years. Of the two hundred clients seventy-three percent were single, sixteen percent were married and eleven percent were divorced or separated. (Table Number 4, Appendix A)

The levels of education ranged from no formal education or only ungraded classes, to college training beyond the graduate level. (Table Number 2, Appendix A)

As measured by the Wechsler Adult Intelligence Scale, the mean intelligence quotient was 90. For the males the mean intelligence quotient was 90 and for the females 90. (Table Number 5, Appendix A) As the acceptance criteria ruled them out, no individual below the level of 50 I. Q. was included.

All of the individuals referred were severely disabled and considered "probably unemployable" by referring agencies, on the basis of previous services. Many of the multiple handicapped were sent to the demonstration project as a "last resource".

The handicap which presented the most serious barrier to employment of a client was considered to be the primary handicap.

In instances where epilepsy was present, this was accepted as the primary disability, even though there were other existing, severe disabilities such as mental retardation, emotional immaturities, or physical handicap.

Two of the individuals in the group of mentally retarded who were extremely retarded socially, had been found on previous tests to have scores which placed them in the mentally retared range. Although, on the project intake test they were found to have scores of 84 I. Q., they were retained in the classification of mentally retarded, as shown in Tables 23 and 24, Appendix A.

The primary handicaps considered barriers to employment were grouped into four categories, with the number of clients in each category shown in Table Number 1, Appendix A.

The following list of diagnoses taken from case records is presented to show the range and severity of the disabling handicaps:

Brain damage with emotional instability
Epilepsy with spastic paralysis of left hand and mental retardation
Depressive reaction with diabetes
Myocitis ossificans with severe social immaturity
Spinal bifida with mental retardation
Anxiety reaction, passive-dependent personality
Morquio's disease with sociopathic personality
Paranoid personality
Paraplegia with inadequate personality
Psychoneurosis with somatic complaints
Visual defect with emotional immaturity
Bilateral leg amputation, socially immature
Post tuberculosis with mental retardation
Rheumatic heart disease with emotional immaturity
Infantile hemiplegia with immature personality
Deafness with personality disorder
Emotional immaturity with marked speech articulation
Coronary thrombosis with phobic fears
Ulcerative colitis, anxiety reaction with depression
Conversion reaction with mental deficiency
Post tuberculosis with retinal detachment

Post polio with anxiety reaction, severe hostility
Congenital dislocation of right hip with atrophy of muscles and mental
  retardation
Post encephalitis with poor coordination and visual difficulty
Myotonia atrophica with mental retardation
Marfan's Syndrome with severe emotional immaturity
Epilepsy with internal hydroencephalitis
Fredericks Ataxia with social immaturity
Blindness with social and emotional immaturity
Cerebral palsy with inadequate personality
Epilepsy with arthritis, glaucoma and mental retardation

Wages Paid to Clients

Wages to project clients were within the provisions of workshop certificates granted by the wage-hour division of the United States Department of Labor. They were paid the piece rate for the given job, or twenty cents an hour, whichever was greater, for work done in the contract division. In other departments of the plant they were paid an hourly rate within the prevailing wage range for the particular job. Average hourly earnings for the project clients during the four years was 62.24 cents per hour.

Production norms for specific jobs in the shop, minimal standard production norms for the same types of work in industry and the daily production record to measure output of the individual client on the job were considered in wage administration.

Although time was allowed for clinic visits and counseling with the project staff, fringe benefits such as paid vacation and group insurance coverage were not available to the project workers.

CHAPTER II

THE INTAKE PROCESS

The philosophy that the eventual work success of any handicapped person is contingent upon an accurate rehabilitation diagnosis, and a sound rehabilitation prescription was reflected in the intake procedure designed to provide complete understanding of the individual, his problems, his attitudes, his assets and his work limitations. From the pooled judgement of the professional and supervisory staff in weekly case conferences, was developed the subsequent rehabilitation program for each client. Recommendations for work evaluation, vocational training, work adjustment, and other medical, psychological, social case work and vocational services were made by the admissions committee during the process of intake. A number of persons who had been deemed nonfeasible by other agencies because of the severity of the handicap, were accepted and derived significant benefits.

Steps in the Admission Process

1. Medical Examination

Even when previous medical reports were available, a complete medical examination was given by the Goodwill Industries medical director. Audiometric and vision tests, cardiograms, chest x-rays, and laboratory findings of blood and urine specimens were included. The medical director established the physical work limitations on the basis of his findings.

2. Social History

The social worker made intensive studies of the social experience of the applicant, including developmental, family, educational and personal histories; obtained Social Service Exchange information of other agency contacts, reports of previous contacts with clinics and treatment centers, and work records from previous employers. These were compiled into a comprehensive report.

3. Psychological Tests

The routine battery of psychological tests administered was: the Wechsler Adult

Intelligence Scale, Bender Gestalt, Draw-A-Person, Rorschach, Purdue Pegboard, usually the Minnesota Multiphasic Personality Inventory, except where clients were illiterate, and the Wide Range Achievement Tests. The Revised Stanford-Binet Intelligence Scale Form M was occasionally given.

4. Psychiatric Consultation

The psychiatric consultant's time was largely given to conferences with staff members for discussion of problems of supervision or counseling. He saw marginal clients for evaluation when there was a question of acceptance or denial, particularly of the psychiatric patients.

Determination of an applicant's potential to benefit from the demonstration program was based on all of the findings. The staff decision to accept or reject was made only after consideration of the total material.

On occasion, when the admissions team could not reach a unanimous decision, a client was entered for only a three-week diagnostic trial period. When a client was deemed not feasible for the program, and interpretation of the reasons for denial were sent to the referring agency.

Clients accepted were usually told to report for their training at the beginning of the following week. Sometimes training was deferred when there was a work shortage in the sub-contract department.

Admission Criteria

Less than seven percent of those referred were denied admission. The criteria ruled out only persons actively psychotic, severely feeble-minded, those with such poor controls that they might be expected to act-out their aggressions, and those who had not attained maximum physical restoration.

Acceptance also required that persons be over sixteen years of age, able to travel on public vehicles or arrange their own transportation, be able to handle their personal needs, and have the endurance to withstand work demands. Work motivation, although vague and diffused but sufficient to predict probable employment, was also required.

Previous work experience was considered desirable. Clients who had none were placed in the regular shop sequence of vocational evaluation for a period of three weeks, to determine need for the program and ability to adjust. (Table Number 8, Appendix A)

Referral Sources

When the caseworker was added to the project staff, referrals were stimulated by visits and contacts with outside agencies. By the third year there was a waiting list of applicants.

In Table Number 7, Appendix A, is shown the wide range of referral sources, grouped by the agencies making a large number of referrals by the four categories of primary disability. The Division of Vocational Rehabilitation referred thirty percent of the cases. The Veterans Administration, Veterans Hospitals and Veterans Administration Counseling Center referred ten percent. Local and state hospitals referred fourteen percent; twenty-one percent were referred from the Personnel Department of the Indianapolis Goodwill Industries; and twenty-five percent from other sources.

The following agencies constitute the category "other sources" of referrals:

Central State Hospital
Division of Services to Crippled Children, Department of Public Welfare
Department of Public Welfare, State and County
Family Service Association
General Hospital
Indiana Agency for the Blind
Indiana Mental Health Association
Intake Department, Indiana University Medical Center
Jewish Social Service
Knightstown Children's Home
LaRue Carter Hospital
Madison State Hospital
Methodist Hospital
Methodist Pastoral Counseling Service
Muscular Dystrophy Foundation
New Castle State Hospital
Noble School for Retarded Childred
Out-patient psychiatric clinics
Sonotone Hearing Service
Southwest Community Center
United Christian Missionary Society
Private physicians

Primary Handicap

When the clients were compared by primary handicap, age and sex (See Tables 22 and 23, Appendix A) there were no significant differences, but when primary disability was compared to intelligence quotient, a highly significant difference was found.

Client Orientation

On the beginning work day each client was seen by the project director for orientation. After a detailed explanation of the purpose of the work adjustment program, informal discussion was centered on traits of a "good worker". Clients were asked to assume the role of an employer and enumerate desirable qualities in a worker. Those elicited usually were:

a. Ability to produce good quality of work
b. Ability to produce satisfactory quantity
c. Ability to get along with supervisors, to attend to the job, to avoid excessive talking, and to be cooperative
d. Promptness - reporting for work and in returning from rest and lunch breaks
e. Safety-mindedness - to avoid taking chances or ignoring plant safety rules which could cause personal injury or damage to materials or equipment
f. Acceptable appearance, appropriate dress, good grooming and personal hygiene
g. The ability to gain satisfaction on a job
h. The ability to tolerate work stress, job changes, production pressures and minor aches and pains

Interpretation of their comments emphasized the requirements of competitive industry for these characteristics, that an important goal of the program of adjustment would be the acquisition of these traits for themselves, and that their progress would be determined by their ability to develop good worker traits.

Specific explanation was that work routines required five days each week, from 8:00 A.M. to 2:30 P.M., and that pay checks would reflect individual production rate and quality of work.

The clients were introduced to their supervisors to continue the orientation, taking them on a tour of the plant, showing them the rest-rooms and cafeteria. Clients were given Social Security forms for completion. Workers under eighteen were instructed in the procedure of obtaining work permits. Time-cards with individual numbers were assigned and instruction in ringing the time-clock was given. New workers began in small groups or individually.

CHAPTER III

TECHNIQUES OF TREATMENT

The term "treatment" in this report refers to the general adjustment of a client to a "work hardening" program in the industrial milieu.

The therapy "prescription" for each client was written at the weekly staff meeting by the total team in relation to individual client needs. Alerted to observe the clients in the cafeteria, in the work area and in other areas of the plant, the members of the project staff shared their observations of significant behavior or manifestations of anxiety, aggressiveness or withdrawal.

The Technique of Supervision

Throughout the four years of the demonstration, the supervisor-client relationship was believed to be the most vital factor in the treatment, as the clients were in most constant contact with the supervisors.

The supervisors assigned the clients to jobs, gave them instruction in the techniques of work, arranged the work lay-out and modified job set-ups to increase efficiency and comfort. The supervisors were required to keep daily records of rates of production and work quality. They recorded observations of client behavior; inappropriate verbalizations; unusual mannerisms: manifestations of undesirable attitudes toward co-workers or supervisors; lengthy or frequent visits to the restrooms or drinking fountains and violation of plant rules. The supervisor "checked-out" the clients under his supervision at the close of the work day, discussed records of their work performance and answered any job-related questions which they asked. Clients were always referred to their assigned counselor for non-work problems.

One of the most important supervisory tools for therapy was the "role variation" treatment. Like a benign parent the supervisor was accepting and supportive during the first three weeks. He began then to introduce minimally stressful situations as he became more demanding. Toward the terminal week the supervisor became an autocratic and authoritative person, making increased demands. The rapidity of the change of supervisory roles was determined by decision of the staff team, in relation to individual client need. When production or quality of work became inferior, or when a client manifested feelings of discomfort, the stressful demands were relaxed or increased according to need.

With the gradual demand for improved quality and production of work came firmer correction of poor work habits, absenteeism, violation of plant rules, resistance to supervision, or over-socialization on the job. A shift to a different supervisor was routine in the beginning of a client's eighth week. In the few instances when a difficult client caused a supervisor to become emotionally involved, the supervision was changed.

All of the members of the project staff were available for consultation but it was the day-to-day responsibility of the supervisor to deal with the clients on the job. With some of the anxious or disturbed clients, this was no small burden.

The Technique of Casework

The caseworker served as the liaison person with the client and outside agencies. When necessary she arranged clinic appointments for clients and assisted them with budgetary, housing, and other personal problems.

The social worker evaluated home and family conditions of clients before they entered the project. She interpreted program and goals and explained the wage structure to clients and family members. Wives, parents and children were called in for interviews when their help could be enlisted to effect needed attitude change of clients. The social worker made home visits when necessary.

She reported progress of the clients to referring agencies and reported current treatment plans of the referring agencies to the project staff. She also carried some of the counseling case load on a weekly basis.

The Technique of Counseling

The psychologist shared the weekly individual counseling with the caseworker and led group counseling sessions.

The philosophy was in agreement with Waldrop, (14), that counseling in rehabilitation is clearly differentiated from psychotherapy. Counseling was focused on dealing with the normality of the person and his capacity to function within the realities of his goals, helping him to accept work routines, to see himself realistically as a worker, exploring with him his vocational interests and realistically appraising his own vocational strengths and weaknesses.

The Technique of Job Shift

In consultation with the project director, clients were shifted from a job when it was found to be beyond their capabilities, or when they were thought to be tense or anxious.

Job shifts from the contract division to other areas of the plant were made when a work stoppage occurred in the contract division or for the purpose of giving a client a new job experience.

When he was to be placed on a job outside the contract division, his supervisor explained the reasons for the transfer, the objectives of the trial, and interpreted the new dual supervision to the client--that he would be supervised by both the department supervisor and the project supervisor, to prevent confusion as to which of the two was the real "boss". The project supervisor also prepared for a successful job experience and continuity of goals for the client by communicating to the plant supervisor his particular problems and needs.

The diversified production operation of the Goodwill plant offered a wide variety of work for evaluation of clients' vocational interests, aptitudes and abilities. This diversity of jobs also offered an opportunity to test a client's ability to handle increased work pressures, relate to new co-workers, and adjust to the varying complex work areas. When a client was unable to handle the increased work pressures, he was returned to the contract division. This diversity of work throughout the plant provided greater opportunity for testing work skills and adjustment to work.

The Technique of Job Placement Counseling

The goal of outside employment was always the central focus of the adjustment program. Readiness for an interview with the job placement counselor varied among the project clients. When a client had benefited sufficiently from the project, had adjusted to the various job trails in the plant and had acquired positive work motivation, he was seen by the job placement counselor. With some clients this readiness was apparent during the first few weeks. Others required sheltered employment in the plant for some weeks following the conclusion of the project program.

The placement counselor talked to clients individually or in groups. The "etiquette" of applying for a job, the importance of appropriate dress, and appropriate interview conduct were discussed. Techniques of talking to an employer were learned in role playing. Clients were also given practive in filling out application forms.

These interviews also offered opportunities for determining vocational interests and clients' knowledge of the nature of preferred jobs.

In the final four weeks the clients were intensively prepared for job placement attempts. Supervisors exerted additional pressures to equal industrial demands and the placement counselor gave continued instruction. Even the questionable clients not completely ready for outside jobs, were sent on temporary job trials, with care that the employer had an understanding of clients' assets and liabilities in each case.

The Technique of Group Counseling

The social situation of the workshop was difficult for clients who had little previous experience with social demands. Because of the shelter and isolation of their homes and families, the younger clients had no experience in dealing with the demands of a work group.

Unlike the individual counseling, group counseling was not a continuous phase of the treatment, although most of the clients benefited from the group experience.

The project psychologist, trained in group therapy, conducted most of the group meetings to provide the social interaction where clients became more adept in handling relationships with work peers.

Early in the program group meetings were held to correct inappropriate job conduct by role playing, where clients became the supervisor, the worker, the project director, or the employer interviewing a job applicant. The role playing technique was useful in orientation of new clients, or where reprimand for unacceptable behavior was necessary.

CHAPTER IV

TECHNIQUES OF EVALUATION

Over the years, experience in the Goodwill Industries had proven that, because of personality problems, not all workers with previous work history and demonstrated skills have experienced job success. Workers who had the native skills to succeed were separated from previous jobs because of poor work habits, inability to get along with co-workers, resistance to supervision, chronic absenteeism or tardiness, unkempt dress, lack of motivation to work on the assigned task, or personality characteristics which were psychological barriers to their job success.

Vocational Pattern

The Jewish Vocational Service prototype report described a "vocational pattern" with five areas of work behavior. A similar assessment of work personality in various areas was identified in the Goodwill demonstration as follows:

1. Interpersonal Relations

Entrance into the project for some clients aroused anxieties concerning the worker-supervisor relationship, since it was a first step into the world of work. With their parents and perhaps other authoritative figures they had learned to be childishly obedient or negatively aggressive. They had no knowledge of the appropriate response to authority. They responded with apprehension or hostility when they were observed by the supervisors on a job.

Many clients, lacking social skills for relating appropriately to others, withdrew from their co-workers, while some talked and laughed excessively.

The responsibility of imparting an understanding of appropriate work behavior to the clients was a continuing supervisory challenge.

2. Utilization of Ability

Clients differed in the use of their abilities as widely as they differed in their work potentials. While use of skills was somewhat dependent upon efficient job lay-out, understandable instructions, suitable tools and materials, the individual's own motivation to work determined the extent of the utilization of his native skills.

The motivation factor tended to be unpredictable. Some clients worked at higher levels of production when assigned to particular jobs. Some clients worked best in small groups, others worked best in large groups. Some few were best motivated when they were isolated from other workers. Repetitive jobs motivated some, complex jobs requiring initiative motivated others. Competitive jobs stimulated some workers, while other workers ostensibly quit when placed in competition.

Motivation was affected by home problems, changes of medication and other factors outside the work setting.

3. Work Satisfaction

The ability of a client to obtain some gratification from work was considered one of the most important personality factors of work adjustment. Many of the project clients realized their first job satisfaction in taking home a pay check and in the experience of having a productive job in a genuine work setting.

4. Adjustment to Work Pressure

The work pressures in the project demonstration elicited a variety of reactions from clients: overt acting-out, withdrawal, verbal belligerence, furtive resistance and in a few instances, actual walking off the job.

Because many of the sub-contracts were of short duration, frequent changes in job assignments of the clients was necessary. This shifting from one job to another was stressful for clients and operated as a real work pressure. Other pressures were effected by change of the work environment. Relocating the worker in a department where noise was constant, where he had to pace his performance by the speed of a press or machine, where temperatures were extreme, or where the demand was for increased rate of production, were all pressures which were utilized to evaluate and "harden" a client's tolerance for work pressures. A continuing pressure on a client as he progressed in the program, was the varying role of the supervisor who changed from a supportive, benign "helper", to a demanding "boss".

The clients who could adjust to the pressures of this simulated industrial atmosphere were considered "work hardened" and ready for placement interviews or training in a specific job. For those unable to adjust to the pressures, the damands were altered. For the few who could not endure the full load of work pressures during the entire twelve weeks, training was extended, or placement in sheltered work provided time to consolidate their learnings.

5. Self-concept as a Worker

Just as the "self picture" defines for any person his psychological identity with an intricate variety of personal characteristics, the "meaning of work" concept involves a complex of attitudes and goals for those handicapped who had been conditioned by life to regard themselves as essentially dependent.

Of some of the younger clients who had never fully differentiated themselves from their parents, it was never anticipated that the twelve weeks of the project would bring them to maturity, but it was expected that the growth process would be stimulated.

Those who had come with a distorted, confused self-image and doubts of ever taking their places in the adult world, were unable to see themselves as productive workers and dropped out of the program. Others with equally guarded prognoses gained self respect and, as if they "caught" new concepts of themselves, achieved employment status.

Several attempts to measure the self concept of workers through check lists and sentence completion tests were abandoned. Supervisory and staff impressions of clients' attitudes toward themselves were eventually accepted as the valid measure.

Supervisory Ratings

At the end of each work week the supervisors recorded a rating of the clients, indicating the type of supervision (permissive, supportive, matter-of-fact, authorative, controlling), whether the client worked alone or in a small group, the production norm and quality level. The rating sheet noted the title of the job, description of the operation, hours worked, units completed, hourly output, standard performance for the job, and a narrative description of the client's behavior. (Appendix B, Page Number 89)

A weekly Guide for Vocational Pattern (Appendix B, page 86) was a check list for detailed facets of adjustment in the five areas of the vocational pattern. The Weekly Guide for Vocational Pattern and the daily job appraisal (Appendix B, page 91) were guides for the completion of the Weekly Client Evaluation (Appendix B, page 92) and presented graphic weekly reports of a client's progress for presentation at the weekly project staff conferences. Information from the several supervisory forms was the basis for evaluation of the needs of the client and the prescription of client treatment throughout the program.

Staff Ratings

The supervisory ratings provided the framework for the discussions of client progress at the project staff conferences. These, in addition to materials regarding contacts of the social worker, the counseling interviews, additional test results by the psychologist, interviews with the placement counselor and observations of client behavior in areas of the plant, were all discussed. Evaluations of adjustment were made in the five areas of the vocational pattern.

In the weekly evaluation meetings, goals for the client's ensuing rating period were established, decisions were made to continue or discontinue questionable clients, prescriptions for increased or reduced production demands were developed, transfers to different jobs were recommended, referrals for additional testing authorized, and treatment from outside agencies, or referrals to the psychiatric consultant were approved. When the decision was for termination or continuance of a marginal client, continuance was always unanimous, if any slight evidence of ability to meet the standard of employability or sheltered work was evidenced. The project director was always the final determinant of the major decisions.

Employability and Placeability Ratings

The ratings of employability and placeability were developed by the prototype program of the Jewish Vocational Service and were adopted by this program, recognizing that total rehabilitation culminates in an individual's getting and holding a job. These ratings required the staff to estimate at the time of the rating, the extent to which a client was placeable and employable.

As defined in the prototype report, employability was the capacity to engage in productive work. It is specifically related to job skill and work personality. Placeability reflected an individual's ability to obtain a job in the labor market.

The project placement counselor found that disfigurements, speech impairment, illiteracy, facial tics and athetoid movements of head, arms or legs, were psychological hindrances to an employer's acceptance of handicapped individuals, even when they had the skills and work personality to hold a job. Such factors of placeability were sometimes the sole reason for failure of a client to obtain a job.

Cooperative Use of Rating Scales with the Jewish Vocational Service

In order to validate employability rating scales which the Jewish Vocational Service of Chicago had developed in an Office of Vocational Rehabilitation research grant program, the Indianapolis Goodwill Industries in January, 1959, was asked to cooperate by putting the scales to practical use in the demonstration project.

Three rating scales were available, a Counseling Scale for completion by the caseworker at the time of intake, with predictions based on the social, educational and employment backgrounds of a client, a Workshop Employability Rating Scale, for completion by the Industrial supervisors at three, seven, eight and twelve week intervals, and a Follow-up Scale for completion by the placement counselor at each quarter of the follow-up period.

The Counseling Scale was discontinued after eighteen months of use at the request of the Jewish Vocational Service. No practical value to our program was found.

The Workshop Rating Scale was very valuable for the supervisors as a practical tool for thorough evaluations and for training the staff to acquire the techniques of evaluation. The reliability of the scale will be eventually reported by the Jewish Vocational Service, conducting the research.

The rating scales were constructed on four-step bases as follows:

I. EMPLOYABILITY RATING SCALE

A. Fully employable - capable of maintaining stable employment within level of skill.

B. Moderately limited employability - because of moderate physical and/or psychological limitations, requires some understanding and acceptance by employer. May not be able to meet accepted industrial standards without more than ordinary amount of supervision. Should be considered to be toward lower end of employable continuum.

C. Severely limited employability - because of severly handicapped physical and/or psychological limitations, requires an unusually accepting and understanding employer. Cannot meet accepted industrial standards even with intensive supervision. Can work only under sheltered conditions.

D. Unemployable - unable to meet requirements of even sheltered workshops.

Of the one hundred fifty-nine clients who completed the twelve-week adjustment program, seven were given an employability rating of "A", forty-two received an employability rating of "B", seventy-six fell within the employability rating of "C", and thirty-four were considered unemployable by the employability rating "D". (See Table Number 17, Appendix A)

II. PLACEABILITY RATING SCALE

1. Placement relatively easy - employment readily available.
2. Placement somewhat difficult - requires moderate degree of solicitation to meet special requirements of the applicant.

3. Placement only with difficulty - requires intensive solicitation and field work activity. Sheltered employment may be the only avenue of placement.
4. Unplaceable - Either no jobs available or person is too handicapped to be placed on a job.

Of the one hundred and fifty-nine clients who completed the twelve-week adjustment program, 3.14 percent received a placeability rating of One, 11.94 percent received a placeability rating of Two, 50.31 percent a rating of Three, and 34.59 percent a rating of Four. Thus, on completion of the program the staff estimated that the majority of clients would require either intensive employer solicitation and field work activity, or that they would not be placeable in any area, either because of the severity of the handicap or because it would be impossible to find the type of work in which they might perform.

Studies comparing final evaluation ratings by sex, age, intelligence quotient and education of clients reveal no significant difference. (See Tables 9 through 12, Appendix A)

CHAPTER V

TECHNIQUES OF FOLLOW-UP

The procedures for follow-up of clients were from two directions: (1) by the caseworker who gave help with social problems of the clients when they sought assistance, and (2) by the placement counselor who developed a well structured follow-up study of the employment experience of all clients.

Follow-up Services of the Caseworker

At the time of separation from the program all clients were told that they might return for help from members of the staff during the year following separation from the project. The placement counselor would assist them with job problems. The social worker or psychologist would help with other problems.

The psychologist saw a few of the clients, usually for additional testing, or as with one client, for help in handling recalcitrant children.

The social worker saw a number of the clients for continuing casework service, such as finding agencies to provide them financial assistance, childcare service, or other special services. The number of clients seeking this kind of follow-up service was not great.

Follow-up of Job Placements

Some clients were placed on jobs before completion of the entire twelve weeks. The majority of the placements were made immediately upon completion of the twelve-week program. The placement counselor was unusually sensitive to proper placement of the clients. He had personal interviews with all employers from whom he sought jobs. In these interviews with employers the specific problems of each client, particular job skills, job limitations and areas of caution were outlined by the placement counselor.

Placement of many of the clients who were given a final "D" rating as unemployable was possible because of the skill of the placement counselor in developing relationships with employers who were willing to provide him with job orders. As is shown in Table Number 17, Appendix A, sixty-five percent of the thirty-four clients rated "unemployable" were placed in full employment, temporary employment or in sheltered work. This difference is significant at the .05 level of confidence.

While the project staff members were justifiably cautious in their evaluation of employability of clients on completion of training, it was found that many clients were able to consolidate their learnings in the project experience only after they had left the program. Thus, the skill of the placement counselor and his relationships with employers became increasingly effective.

Aside from the statistical data, much information was gained in the follow-up study as to the practical benefits of the project to clients. Comments from the clients and members of their families provided additional data for measuring the value of the demonstration. Contacts with project graduates at quarterly intervals of the follow-up period of one year, encouraged those who needed assistance to return for help with employment problems.

A form constructed by the Chicago Jewish Vocational Service, "Follow-up Record of Employment History" (Appendix B, page 101) was found to be comprehensive and useful. This device easily identified clients eligible for placement, listed jobs, names of employers and reasons for separation in instances where they had had several jobs. The placement counselor contacted clients personally, by telephone, and when unavailable, by letter, with an enclosed questionnaire. (Appendix B, pages 98 and 99)

When clients who were placed on jobs were compared by age and sex, no significant difference was found. (See Tables 13 and 14, Appendix A). When clients who had previous work experience were compared by final evaluation categories, no significant difference was found. (See Table Number 15, Appendix A) When they were compared by job placement and intelligence quotient, it was found that the group with I. Q. 106 and above were the most successfully placed, a difference at the .05 level of confidence. That the more intelligent clients would be more easily placed on jobs was in the expected direction. (See Tables 16:1 and 16:2, Appendix A)

A total of forty-one clients left the program before completion of the twelve weeks, as is shown in the Table Number 18, Appendix A.

Of the one hundred fifty-nine who completed the program, as is shown in Table 17, Appendix A, one hundred and twenty-nine, or eighty-one percent, were placed on some type of job.

The types of jobs on which project clients were placed, according to the Dictionary of Occupational Titles, were as follows: (including those who did not complete the program)

Professional
Clerical
Sales
Domestic Service
Skilled
Semi-skilled
Unskilled Occupation
Personal Service
Protective Service
Building Service
Agricultural-Occupations
Horticultural Service
Learner and Trainee

A more complete summary of the jobs in which clients were placed is shown in Table Number 19, Appendix A.

The follow-up study reveals that, while the project staff rated as employable only forty-eight percent of the mentally retarded group, seventy percent of them were actually employed in either full time stable employment on several jobs, most of the time in half-time employment, in full time sheltered employment, or occasional and/or temporary work.

EVALUATION COMPARED WITH JOB FOLLOW-UP STATUS AT CUT-OFF DATE*

PRIMARY DISABILITY	EMPLOYABILITY EVALUATION (percentages)		JOB PLACEMENT FOLLOW-UP (percentages)		TOTAL
	A-B-C	D	a to e	f-x-y	
MENTAL RETARDATION	.478	.522	.696	.304	27
EPILEPSY	.720	.280	.760	.240	26
EMOTIONAL DISORDER	.880	.120	.840	.160	99
PHYSICAL HANDICAP	.833	.167	.806	.194	48

* (The follow-up survey varied from three years to nine month periods. This is based on the final follow-up for all clients.)

Follow-up surveys reflected in the above table include a three-year follow-up for first year clients, a two-year follow-up for second year clients, a one-year follow-up for third year clients, and follow-up surveys ranging from three to nine months for fourth year clients. (See Tables Number 25, 26 and 27, Appendix A)

As shown in Table Number 25, Appendix A, of the thirty-six persons who were found on the one-year follow-up to be on jobs rated "a and b", only three percent of them had been given staff ratings of "A" predicting full time employment within the level of skill, but thirty-nine percent of them had been given "B" ratings predicting full time employment within the physical and psychological limits of their tolerance. Forty-four percent had been predicted to be sheltered workers with a "C" rating. The "D" rating of "unemployable" had been given to fourteen percent.

Of the persons on the one-year job follow-up found to have had employment in the "c" and "d" categories, two percent had been given staff ratings of "A", fifteen percent had been given staff ratings of "B", thirty-seven percent had been given ratings of "C" as sheltered workers, and forty-six percent had been rated unemployable with "D" ratings. The staff predictions were more accurate concerning the sixty-four persons given "e" and "f" ratings on the one-year job-follow-up, with only six percent predicted as capable of full employment, seventeen percent as employable within limits, thirty-six percent as sheltered workers, and forty-one percent were predicted as unemployable. (Table Number 25, Appendix A)

In Table Number 26, Appendix A, is presented the results of the job-follow-up at the two year period following completion of the program. Again the majority of the clients were found to be employed at higher ratings according to the job-follow-up survey, than had been predicted by the staff, but the discrepancy between the two ratings was slightly less than was revealed in the follow-up at the end of the first year of follow-up. (See Table Number 25, Appendix A)

Of the clients receiving "a and b" job-follow-up ratings on the two-year follow-up study, the staff predicted six percent would be fully employable, twenty-eight percent would be employable within physical and psychological limits, forty-six percent would be sheltered workers, and twenty percent would be unemployable. Of those receiving "c and d" follow-up ratings, eleven percent had been predicted as fully employable, seventeen percent as employable within physical and psychological limits, twenty-eight percent as sheltered workers, and forty-four percent as unemployable. Of those receiving "e and f" follow-up ratings, none had been predicted as fully employable, twenty-five percent had been predicted as employable within physical and psychological limits, thirty-two percent as sheltered workers, and forty-three percent as unemployable. (Table Number 26, Appendix A)

The staff was cautious in its predictions of employability throughout the program and there was a tendency to under-rate clients on the scale. This caution was reenforced by experience which indicated that clients required time to consolidate their learnings. Those who were placed on jobs in the sheltered workshop were found to need time to further adjust before eventual placement in competitive full-time jobs could be made. Some of these individuals had been rated as unemployable by the staff while in the project. (See Table Number 27, Appendix A)

Twenty-one of the clients who finished the twelve-week adjustment program received a job-follow-up rating of "x", indicating that they had not obtained jobs because of hospitalization, marriage or death. (See Table Number 28, Appendix A) Of the total of twenty-one, eight of the first-year clients were hospitalized and one deceased. All nine of these individuals had been considered unemployable, according to the employability ratings given them by the staff on termination of their adjustment program.

Of the second-year clients who received a follow-up rating of "x", four were hospitalized and one married. Of these five clients, one had been given an employability rating of "B" (employable within physical or psychological limitations), two a rating of "C" (employable in sheltered workshop), while two had been considered unemployable by the staff on completion of their program. (Table Number 28, Appendix A)

Of the third-year clients who were rated "x" on the follow-up, four were hospitalized. Of these four, one had been given an employability rating of "C" (employable in sheltered workshop), while the other three were considered unemployable on completion of their adjustment program. The three fourth-year clients who had to be hospitalized were classified as "x" on the job-follow-up. They had been given employability ratings of "D" (not employable), on completing their adjustment training program. (Table Number 28, Appendix A)

According to staff evaluation ratings of employability, a higher percentage of those individuals classified as having the primary handicap of emotional disorder were judged to be more employable and placeable than were those in the other three primary disability groups. Those persons with the primary handicap of physical disability received the next highest employability ratings by the project staff and were also the next highest in number, of the four primary disability categories who were placed on jobs.

When the groups of primary handicaps were compared by age and sex of client, there were no significant differences, but because of sample bias when compared by intelligence quotient, there was significant difference as would be expected. (Tables 21-22-23, Appendix A)

One hundred fifty-nine clients of the total population of two hundred, completed the program. At the time of the cut-off of the job follow-up study of this population, forty-seven were found to be in full stable competitive employment; twenty-one had worked most of the time but on several jobs; six had worked at least half possible time in competitive employment; thirty-four had been in full time sheltered employment; nineteen had worked on only occasional or temporary work; fifteen had not obtained a job; seven were lost to the follow-up study; and ten were found to have been unemployed because of hospitalization, death or marriage. (See Table Number 24, Appendix A)

When compared by primary handicaps, by employability evaluation and by final job-follow-up ratings, as shown in Table Number 24, Appendix A, there were differences significant at the .01 level.

When considering the population of one hundred fifty-nine clients who completed the program, Table Number 17, Appendix A reveals that sixty-four percent, or 129, were placed on jobs. When broken down into percentages of placements according to primary disability, it is observed that those in the emotional disorder category experienced the greatest job placement success. It is interesting to note that the staff considered those in this category as having the greatest employability potential at the time of the final evaluation, since it gave seventy-one percent of them the highest employability rating of "A". Percentages of placements according to primary disability were as follows:

Emotional Disorder	.840
Physical Handicap	.806
Epilepsy	.760
Mental Retardation	.696

The final follow-up of job placements of 129 clients classified their employment as follows:

	Clients	Percent
(a) Full stable employment	46	36
(b) Worked most of the time on several jobs	23	18
(c) Worked at least half possible time	6	5
(d) Occasional or temporary work	20	15
(e) Sheltered employment	34	26

When classified accordingly, forty-six clients (thirty-six percent) of the follow-up sample of 159, maintained themsleves in full stable employment; twenty-three clients (eighteen percent) worked most of the time but on several jobs; six clients (five percent) worked at least half possible time; thirty-four clients (twenty-six percent) worked in sheltered employment; and twenty clients (fifteen percent) had only occasional or part-time work.

CHAPTER VI

CASE HISTORIES OF TYPICAL CLIENTS

A CLIENT WITH SEVERE PHYSICAL HANDICAP AND EMOTIONALITY

"A", age twenty, referred by a friend of the family, was diagnosed as having myositis ossificans, failure of calcium metabolism, causing calcium to collect in the muscle tissue and joints, with the onset at age eight.

Physically, he was poorly developed, unable to sit except in a specially designed stool upon which he could prop himself against a wall. Although possibly progressive, his condition had been diagnosed as stabilized, with a prognosis of gradual progression and an unpredictable life span. He appeared frail and immature. He had been over-protected in the home.

His capacity for standing, walking, pedal operations and hand-arm-activity on both the right and left sides was limited. His shoulders, elbows, hips and knees were ankylosed. He walked with a shuffling gait.

Client "A" had been refused assistance from other agencies because of the poor prognosis. He was withdrawn from school in the third grade and received home tutoring, which enabled him to graduate with a regular high school diploma. His only work experience was as a helper with his father, a self-employed contractor who bought, repaired and sold appliances. During the first interview he evidenced interest in a work program and opportunity for further training.

Psychological test findings indicated average intelligence, high interests in areas of musical, clerical and persuasive tasks. Personality tests indicated extreme insecurity with severe feelings of inadequacy, and a need for constant reassurance and emotional support. It was suggested that he might be trained for work in business and clerical areas.

"A" was placed in the work evaluation program for four weeks. He drove to work in a car fitted with special controls to compensate for his handicap.

His mentally retarded brother was admitted to the Work Adjustment program at the same time. It was noted that his brother helped "A" in and out of his car and with his wraps. Soon "A" wanted to handle these duties for himself and rejected his brother's assistance. Within a short time he assumed a protective role toward the mentally retarded brother, who was having difficulty in making an adjustment to his work. When this brother was separated, "A" had no difficulty managing for himself.

The nature of his handicap made it necessary to place "A" in an area where he could lean against a wall as he sat on his high stool. The number of work samples on which he could be tried was limited. It was found that he did best on clerical tasks in the pay-roll department and on computational and adding machine work. He had average ability in comprehending and retaining instructions. His writing was fairly legible but his spelling and use of grammar showed many errors. He was quiet and rather withdrawn at first but gradually expanded his social contacts. He demonstrated the ability to overcome his feelings of insecurity and need to be dependent.

When he was placed in the demonstration project, he remained in the clerical area but was given intense office training, supervisory support, and counseling to help him overcome problems which would interfere with his eventual placement in competitive industry.

"A" has been placed on a job with a small heating and air conditioning plant where he has entire responsibility for managing the office, maintaining simple records, taking telephone orders, and serving as information clerk. He has married and has become the father of one child since he completed the program.

AN EPILEPTIC WHO BENEFITTED FROM GROUP COUNSELING

"P" came to the Goodwill Industries from the Indiana Village for Epileptics when he was twenty-four years old. The epilepsy was under good control. He had poor use of his left hand and limped, the result of a congenital spastic paralysis of the left side.

One of eight children, "P" was four years old when his mother became mentally ill and the father placed the children in an institution. He was removed temporarily by a sister when he was thirteen, but because he exhibited some behavior problems, she returned him to the orphanage, which placed him in the epileptic village because of an increase in his seizure frequency.

On the psychological tests he was found to have average intelligence, some organic impairment, and neurotic tendencies, but was socially out-going with capacity to relate well to others. It was recommended that he be trained in work where he would have contact with people, possibly as a hospital attendant.

In an evaluation program he was a willing worker, was responsive to directions and eager for vocational training. He was placed in a Goodwill retail store as a sales clerk, where he worked for slightly over two years. He took an outside job but returned four years later, needing help in finding employment. He had been on a number of different sales jobs, on which his salary was usually in the form of commissions. He had been unable to support himself. He had lost a job in a large department store where he worked as a food department stock boy because of unsatisfactory performance.

When interviewed it was apparent that he had problems suggesting need for work adjustment, as he tended to oversell himself. In the work setting he used his personality to make friends of a supervisor to get by, and appeared to want a job where he would receive recognition and praise.

Many of the assembly jobs were difficult for him. Because of his handicap he could not attain high production. He was well motivated to work and his attitudes were modified. He no longer resisted supervision and began to approach all assigned work with steady application.

When he was transferred to another supervisor at the end of his seventh week, pressures were increased for production and improved quality. He got along well with co-workers, seemed to understand the meaning of work, and directed his energies well.

During this period "P" was included in the group counseling meetings. He participated actively, took the leadership in discussions of work success, contributed original ideas on how to succeed on a job, and appeared to gain considerable satisfaction from this leadership role. He reported with pride that he had a part-time job as tax assessor while continuing to work in the project program.

At the completion of his program he got a job with salary and commission, with a finance company. He remained with this firm until they reorganized and he was put on commission only. He returned to the placement counselor for help and was placed with a drug company on the maintenance staff. He has been reported as doing well.

During the months of the work evaluation and adjustment programs he had no seizures and his epilepsy was not looked upon as a barrier to employment. His long history of institutionalization, resulting in deep-seated resentment toward authority, was considered his major handicap. He was able to reorganize his thinking, learn to relate to co-workers and supervisors, and try out his changing ideas in the group counseling meetings.

A MENTALLY RETARDED WOMAN WITH MULTIPLE PERSONALITY PROBLEMS

"R" was referred from a state hospital where she had been hospitalized for five months. She was twenty-nine years old, single, and had lived with her mother and step-father prior to her hospitalization. Her mother's domination and over-protection had precipitated the hospitalization. Symptoms of somatic complaints disappeared upon admission to the hospital. Never considered psychotic, she adjusted well in the hospital. In occupational assignments she followed directions accurately and willingly and got along well with the staff and other patients. When she was ready to leave the hospital neither the hospital staff nor "R" herself, thought she should return to her mother's home.

Psychological testing indicated a Full Scale I. Q. of 59, but it was thought that she could, with training, succeed on a simple job.

In the intake interview for the demonstration project, she was nervous and shy, talked constantly and rapidly and could not be considered as entirely comprehending the content of the interview. She was first placed in the work evaluation program. Performance on a number of simple jobs was below the average with the exception of cafeteria work, mending, packaging, tagging and marking. Her hand-arm coordination and manipulative hand skills were adequate. She was described as being well motivated, never disruptive, and having ability to remain with a job to completion. The supervisors were very pleased with her performance. Although she was withdrawn and reserved at first, she became more relaxed, friendly and outgoing. She was then placed in the laundry department on steam pressing. After a few months there was a drop in her production. She became increasingly anxious, was unable to comprehend instructions and was then referred for admission to the demonstration project.

She remained in the plant in the clothing finish department but her supervision and counseling were assigned to the project staff. It was learned that some of her anxiety was related to her discharge from the hospital, since living accommodations outside the hospital and away from her mother would have to be arranged. It was arranged for her to live in a dormitory of a home for girls sponsored by a religious organization. This proved satisfactory after some initial apprehension.

The social worker carried the counseling with this client. Few problems in adjustment to the demonstration program arose as she appeared to enjoy the co-worker associations and the associations in the girls residence where she related to the house mother, took part in activities, and established a savings bank account.

"R" remained on a job in the plant for about a year and a half after she completed her adjustment training. She has since been placed in the laundry department of a local hospital as a "shake out" girl. She has performed well and has had several wage increases. The simple, repetitive work has been suitable for her.

It is believed that the multiple problems, social adjustment and severe anxieties, could have been handled only in the special program of the demonstration project. She had the work potential, but without the support and sensitive help of the project staff at the time of her stress, she might not have succeeded.

EMOTIONAL ILLNESS FOLLOWING CATASTROPHIC PHYSICAL INJURY

"N" was first interviewed on the psychiatric ward of the General Hospital for possible admission to the demonstration project. This forty-three year old, married, white male had been in the psychiatric ward for a month following a suicidal attempt by cutting his left wrist. About a year prior to the suicidal attempt he had suffered a skull fracture and concussion from falling fifteen feet to a concrete floor. He complained of severe headache, backache, and loss of balance. Medical reports showed he had an osteoarthritic condition of the lumbar spine.

In the hospital this man was fairly relaxed and said he was ready to enter a work program. When he came in for testing and interviews, after his hospital discharge, there was a marked change. He was anxious and apprehensive and would not have remained for the appointments had not his wife accompanied him. His obvious ambivalance about starting a work program was evidenced by his verbalization that he might not be able to do the work. His apprehension was indicated by hand tremor and blinking of the eyes. Two testing interviews were necessary to complete the psychological testing. He had a Full Scale I. Q. of 111, with scatter on the subtests indicative of emotional rather than organic factors. Difficulty in acquiring new learnings was also suggested. He functioned above the average in tests of general verbal skills and had considerable skill with numbers. The personality measurements showed that he was making a rigid and somewhat tenuous adjustment, saw himself as hopeless, with feelings of hostility toward other persons.

This man had a history of a previous fall when he was eighteen years old. His history of back injuries raised a question as to his feasibility for the program and his vocational placement. Complete medical reports with x-ray and neurological examinations were cleared with the insurance agent before he was admitted.

Medical restrictions permitted only ten pounds maximum lifting and no work around machinery or in areas where he would be required to climb. He attended the outpatient psychiatric clinic for medication while he was in the demonstration program. His complaints of loss of balance and of headache gradually diminished.

His social history showed that he was the youngest of four children; his mother died when he was six months old and he and his siblings were adopted by the maternal grandparents. He described the grandmother as a perfectionist, very strict and generally a "hell-cat". He attended school to the twelfth year, when he quit to help support the family.

Resenting an older brother, who was always presented as the ideal image, "N" ran away from home at the age of seventeen. He married at age twenty-three, had four children, three of whom are still in the home. Because of drinking he had lost jobs when he and his wife separated repeatedly. Their sexual relationship was described as a good one until his last accident, when he became impotent. In spite of the separation he looked upon his home as a happy one, was interested in his children and took responsibility for them.

His depression when he was hospitalized was considered to be due to his inability to work and care for his family. His claim for workmen's compensation had not been settled, so his wife's income was their only support.

Prior to his accident "N" had worked as a carpenter and maintenance man. Following the accident he feared power tools. He did not seek placement in the Goodwill plant carpentry shop, although he originally talked of going back into carpentry work. He worked most of the project period in the sub-contract department on assembly jobs. His production was usually rated ninety or one-hundred percent of workshop standard.

During the first few days of training he was anxious but was soon described as a conscientious worker. His production steadily increased and within four weeks he was thought to be ready for a job in the furniture sanding department. His production on this job was lowered because of the medical restrictions. In the tenth week his anxiety returned, along with somatic complaints. On one occasion he had to leave the job and go home.

It was believed that some of the return of anxiety was due to his approaching separation from the program, his worries about the settlement of his compensation claim, and his ambivalence about returning to carpentry work. He used counseling often during this crucial period and was able to accept a job placement opportunity on completion of the adjustment period.

The placement counselor obtained a job for him with a drug company, where he would be required to do packaging and push boxes onto a conveyor belt while standing. All medical restrictions were lifted when he was fitted with a supporting corset. His last report indicated that he has performed very well and is in line for a supervisory position.

This man could function only in a sheltered work situation because of his extreme anxiety and limited physical tolerance when he entered the project. He gained from trying out work tasks and finally adjusted on a job away from power machines and carpentry.

A CASE OF DEAFNESS WITH SEVERE PERSONALITY PROBLEMS

This forty-eight year old single, white female had severe hearing loss which had increased over the previous eight years, and was found to be unresponsive to treatment or medication. The medical examination also showed osteoarthritis in the fingers and limited capacity for hand activity or lifting.

The social history revealed long standing personality problems with difficulty in relationships aggravated by deafness and resulting in social isolation and a development of paranoid thinking. She verbalized bitter and hostile feelings toward former employers and community agencies who had tried to work with her. She had been without work for a year and her small savings had dwindled. There were no relatives or friends who could assist. She had threatened suicide because of depression over her financial situation.

An only child, she was reared in a small Indiana town, had completed high school and worked in her father's insurance office. After his death she worked in various offices and lived with her mother, who died ten years ago. She talked of her English descent, social status and desire for independence and unwillingness to accept charity.

When placed in the demonstration program, she was slow on production jobs and office work. She isolated herself from most co-workers. She complained about supervisors, the job she was assigned to, her co-workers, and problems with her hearing aid. At the end of the twelve weeks she was rated as unemployable and unplaceable.

In the casework interviews she spent most of the time expressing dissatisfaction with the jobs, the supervisors, and the co-workers. She accepted no responsibility for her own failures and became angry when the caseworker brought this out. She rejected her hearing disability and yet wanted exceptions made for her because of it. She became less defensive as the relationship continued and accepted referral for lip reading. When a new hearing aid was recommended the Division of Vocational Rehabilitation paid for it.

She was tried on a regular job in the plant in clothing finishing, where she sized and tagged men's suits and pants. She complained about the work but was competent. Her relationships with fellow-workers showed improvement, but she sought out other employees who were in the business office. While she gained from the lip reading help at the clinic, it was recommended that she have practice between lessons. Volunteers who had professional skills were scheduled for weekly practice sessions with her. There were marked gains in her social adjustment as her ability to understand increased.

With the help of her new hearing aid, she was placed on a job in bookkeeping and clerical work with the State Conservation Department. Although she still has many complaints about the job, she has remained for the past ten months and is reported as doing well. She occasionally returns to see the social worker, writes to her intermittently and is continuing lip reading instruction.

Although no basic personality change occurred, this woman developed confidence in herself and is more comfortable in social and work relationships.

AN UNSUCCESSFUL CASE

"B" is a young, white, single male eighteen years of age. He was referred from Central State Hospital where he had been a patient for one year. He had been committed to the State Hospital from the County Juvenile Center, with the diagnosis of personality trait disturbance, passive aggressive personality. "B" became acutely disturbed and destructive while in the Juvenile Center and verbalized threats to kill and commit suicide. After he was first sent to the hospital he was placed in a teen-age boys group. He was withdrawn and resistant but at times tried to relate to the fellow inmates and counselors. After two months in the hospital he went AWOL and for two months after this he eloped at every opportunity.

After a re-evaluation of his personality, he was placed on electro-shock therapy. The therapy effected a considerable change in behavior and personality. He began to learn to socialize, attended dances and parties, tried to help other patients with their problems and became eager to enter into a rehabilitation program. The psychological testing report from the hospital rated his intellectual ability within the superior range.

Personality tests revealed that he was a very dependent individual who had been extremely deprived of the satisfaction of his dependency needs. He was described as withdrawn, passive and emotionally unresponsive to others. The psychologist stated he is trying to "substitute love of nature for emotional feelings toward people". The psychologist recommended he needed positive experiences in interpersonal relationships with adults and some form of work which would give him a feeling of accomplishment so that he could build up a more positive concept.

"B" is the youngest of a family of six children. His mother died of cancer when he was two years old. When he was five his father showed no further interest in the children and they were all placed in a guardian's home, where "B" remained until he was eleven years of age. At this time he was placed in a foster home in a small town in Indiana. While in this home he began stealing money and other small items. He complained that too strict limitations were placed upon him and he withdrew from people. He began collecting snakes and other types of reptiles. The delinquency exhibited in this home precipitated his referral to juvenile court and later his detention at the Juvenile Center.

At the time of his referral to Goodwill Industries there was no family interested in this young man and it was stated by the hospital authorities that he would have to become independent of his family, both emotionally and financially. As a step toward doing this the hospital had allowed him freedom and independence by giving him permission to sign himself out for dates and other activities on weekends. "B" had only gone to the ninth grade in school at the time he was sent to the Juvenile Center. The hospital authorities recommended that rehabilitation of this patient would have to be slow and very supportive. Any great amount of pressure in the job situation would cause undue anxiety and fear.

"B's" personal goals on entering the program were to become either a materials handler or a stock boy. He expressed no interest in learning a trade or going on to school, but verbalized a desire to get a job as soon as possible so that he could get out of the hospital. He did not relate too well on a one-to-one basis but in group counseling sessions he took a role of leadership and was helpful to the counselor in conducting the sessions.

He was tried on a variety of jobs while in the project. Supervisors' reports showed that there was resistance and hostility to some job assignments which were demonstrated by a depressed mood and withdrawal when he did not like the work. As time passed the resistance and hostility diminished. The mood swings occurred less frequently and he became more relaxed both in relationship to the supervisor and his fellow workers. He became interested in the group and began dating some of the girls in the program.

His work reports show that he was dependable, on time, skillful in the use of his hands, used his energies well and was extremely cooperative in trying to establish a good work record. The extremely cooperative effort was noted as a liability, inasmuch as it was thought that he was trying too hard at times to impress his supervisor. His production and quality of work were exceptionally good and at the end of the program he was rated as employable but difficult to place because of the history of hospitalization.

A placement was not available for "B" on termination of the program but he continued to come from the hospital and work intermittently in our contract department. During this period we noted an increase in anxiety and some depression. His work performance was still good and the depression was attributed to his inability to find work on the outside.

Two months after termination of the project, "B" was placed on a job as a shipping clerk-helper for a manufacturing company. His job consisted of assembling orders of school supplies, packaging, weighing and labeling these for shipment. The employers knew of his past history and the job was approved as a suitable one by hospital authorities. "B" worked for two weeks on the job and then was fired for failure to follow instructions. His supervisor reported that two or three minutes after he was given instructions or specific orders, he would report back to him that he had forgotten what he was supposed to do. "B" was rehospitalized after this failure on the job.

At this writing "B" is still in the hospital. There are many factors entering into his failure, including the long history of institutionalization and deprivation, plus the lack of any kind of family support in the rehabilitation program. The adjustment program obviously was not long enough to build within this young man the confidence and sense of independence which he needed to acquire. However, at the time of placement he would have resisted recommendations for a longer period in the sheltered workshop. Perhaps the most important factor in his failure is the demonstration of the need for more understanding of mental health problems by employers. If the employer could have tolerated the failure during the initial period, when there was apt to be a lot of anxiety, we might have seen "B" work through the problem and soon give the type of performance he had demonstrated in our shop. The need of considerable support for those who have no family, when they are making a shift from the sheltered shop to outside employment, is obvious in "B's" experience.

CHAPTER VII

IMPLICATIONS AND CONCLUSIONS

Purposes of the Demonstration Accomplished

1. The techniques of work adjustment developed by the prototype were demonstrated to be practical and effective for the majority of the clients who completed the program. Most of those who were not ready for job placement on completion of the project training, evidenced benefits of reduced anxiety, partially restored self confidence, improved attendance, diminished somatic complaints, improved grooming and personal hygiene, improved competence in interpersonal relations, and increased motivation and desire for work.

   Marked change in personal adjustment in the home setting was reported by family members of clients, even when little or no change could be observed in the workshop setting. Lessening of irritability, acceptance of responsibilities in the home, increased flexibility and cooperativeness, reduced worry and complaining, and improved attitudes were often reported by family members.

2. The administration of the adjustment training program as a project unit was difficult in that it had to be integrated into a workshop operation much larger and more complex in structure than the unit which operates on sub-contract work only. The great diversity of the Goodwill program with its thirty line supervisors and department heads, and seventeen professional staff members, required planning of effort directed toward integration and coordination of the project adjustment service with the on-going production and rehabilitation programs.

   The establishment of the demonstration as a separate program in the plant originally aroused feelings among regular workers and staff that the project supervisors did not work as hard, since their clients worked only six hours per day, compared to an eight-hour work day in other departments in the plant. It was also thought that the project staff wasted time in too frequent meetings, was better paid, or was given privileges. These attitudes were revealed in complaints that the project clients who were placed in plant departments "bogged down" production and took the time of supervisors who were too busy to "baby them".

Communication of the new methods of work adjustment was channeled in several directions. Continued interpretations of the purpose of the program to the staff by the Executive Director lessened the complaints, and inclusion of non-project staff in the project meetings developed an increased understanding.

The regular plant supervisors attended the weekly meetings of the project staff for a period of eight weeks, to hear the evaluation reports, to participate in discussion of client work problems and setting of goals.

Brief tests covering these conferences were given the supervisors. Results of the tests indicated that all supervisors gained knowledge of the project procedures and methods. When project clients were placed out in the plant during the fourth year, the respective shop supervisors completed the project performance evaluations. The plant supervisors handled the objective employability and placeability ratings well, but found it difficult to describe the nuances of behavior and personality adjustment, indicating a need for the same type of instruction and training in this special area which the project supervisors had received during the early period of the project.

The intake of new project clients became a part of the regular weekly case conference attended by all professional staff personnel. Non-project, as well as project staff members, contributed to the discussion of the intake studies and made decisions to accept or reject clients. In addition, progress reviews of all project clients were presented.

3. Few sheltered workshops and industrial plants can employ supervisors with graduate degrees because of the shortage of such persons, and because of

salary demands. This demonstration effectively used supervisors without a college degree, as opposed to the prototype program, which employed only college graduates as supervisors without industrial experience.

The two supervisors employed at the beginning of the demonstration remained on the project staff throughout its duration and performed effectively. The prototype agency reported that the statistical analyses of the Indianapolis Goodwill Industries supervisors' ratings of employability of clients revealed consistently higher correlations than those submitted for validation by other agencies.

Preparation of the industrial supervisors in this program was arranged through in-service training, company-financed extension courses and direction from the project staff team. These training techniques were effective and the industrial supervisors performed well, but never became fully aware of the subtle dynamics involved. Occasionally they resisted professional suggestions, believing their own "practical hardheaded" ideas were better. However, their experience in competitive industry had provided them with practical skills which were effective.

This experience with supervisors who were not college graduates suggests that, regardless of academic training, the skill of a supervisor will depend, in great measure, upon the extent to which his training needs have been met and can be met through additional training. The non-college graduate may offer the possibility of a longer tenure of employment once hired, since his aspirations for a position of greater responsibility and status are not likely to be as high as those of the college graduate.

Other Gains from the Demonstration

a. Expansion of the programs of vocational evaluation and vocational training resulted from placement of project clients in these sequences who needed either job experience before transference into the project program, or training in specific jobs after completion of the twelve weeks.

b. Greater utilization of community facilities was developed. Project clients were encouraged to enroll in adult education classes when they could benefit from remedial reading and spelling, speech therapy, or required additional training in typing and filing.

The social worker called on members of the women's volunteer organization, who were professionally qualified to assist project clients in lip reading, speech improvement, and basic reading and arithmetic.

Housing arrangements for the clients who lived outside the city were provided by the social worker. She also cooperated with the Marion County Association for Mental Health in placing mental patients in their Gateways residence.

c. An important benefit to the total service program was the demonstration of the effectiveness of the extension of casework service to families of project clients. The capacity of the clients to use the workshop was often directly related to relationships in the family, plus many other social problems such as money, housing, transportation, etc. The social worker often had to secure the direct participation of the family in the rehabilitation program, in order to facilitate adjustment of the client at work, and also take direct responsibility for assisting the client to make effective use of community services available to him.

d. The need for an extension of vocational counseling service to the total Goodwill Industries population was emphasized by the results of the counseling of project clients.

e. The advantage of a placement counselor to serve the total Goodwill Industries population, and the potential for increased turn-over of training clients because of placement service.

f. The group counseling hours were found to provide opportunities for social interaction and learning, which no other technique in the program paralleled. Although this particular method was utilized only when there was homogeniety of clients, benefits derived by many of the clients from the group activity recommends this type of therapy for use in the sheltered workshop.

Extensions of Adjustment Training Clients

It was concluded by the prototype agency in its monograph report "Adjusting People to Work" (12), that extensions beyond its eight-week adjustment program were not observed to be beneficial to clients extended.

In Table Number 29, Appendix A, is presented comparative evaluation rating by primary disability and job-follow-up experience of clients who were extended for eight weeks.

It may be observed that two of the clients who were retained for a second twelve weeks and one for eight weeks, achieved the highest job rating, "a", and of these two were mental patients. Two of the group had occasional employment in competitive industry and three were employed in sheltered work. Of the entire group of ten, only two were eventually found to be unemployable, and one of these was returned to the mental hospital for continued treatment.

Thus, thirty percent were fully employable, twenty percent were employable temporarily and thirty percent were employable in sheltered jobs. Inasmuch as eighty percent of the group who were extended obtained some kind of employment, the extension of time appears to have been justified.

Results of Analysis of Rating Scales for Ninety-four Project Clients

Findings on the statistical analysis of the Indianapolis Goodwill Industries counseling scales, workshop rating scales and job-follow-up scales for ninety-four project clients, sent to the Chicago Jewish Vocational Center for assistance in their validation of the scales, have been reported in a brief summary as follows:

> The correlation between the workshop rating total scale and the clients in the early placement group (with early placement defined as placement within six months after leaving the program) was .43.
>
> The correlation between the counseling total score and early placement was .36 and the intercorrelation between the workshop rating scale and the counseling scale was .50.

Significant positive correlations were found between Intelligence Quotient and early and long term placements.

Significant correlations with marital status suggested that being married increased success for early and long term placement.

A negative correlation was found between amount of salary and maintenance, suggesting that the lower the salary the greater the chances for high maintenance."

Age, education, number of jobs in a year following termination from the program, and type of disability were found not to be significantly correlated with early placement.

Of the clients meeting the early placement criterion (placement within six months after leaving the program) seventy percent worked more than half of the time following their first placement, and less than fifteen percent of them worked less than a quarter of the time after initial placement.

It is understood that the intercorrelation between the workshop rating scale and the counseling scale of .50, was higher than with the scales submitted for validation from other groups. This might be explained by the fact that the staff of the project in the Indianapolis Goodwill Industries remained constant during the four years of the program; that the scales were completed consistently by the same persons; that the intake procedures were detailed and the materials were shared by the staff; and that inservice training of staff was continuous.

Research

The project was essentially for demonstration but some research was completed. One study by the project psychologist investigated the predictive value of the Fisher Scales of Rorschach protocols in determining employability among subjects, was published in the Personnel and Guidance Journal. (1) Until more reliable

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* Maintenance is defined by two conditions: that the sample is limited to those placed early (on a regular job within six months after project termination); and if a client worked 50% or more of the time after his first placement, he was defined as part of the high maintenance group -- if he worked less than 50%, he was defined as part of the low maintenance group.

scales to predict employability of handicapped persons from Rorschach protocols are developed, it was concluded that staff ratings based on a number of variables were likely to be more valid. Reprints of the article were circulated among the Goodwill Workshops by the national Goodwill organization.

The project experience stimulated a study to measure attitudes toward the handicapped utilizing the Yuker Scale (16). A sentence completion test was also devised for the purpose. A paper based on this study was read at the national meeting of the American Psychological Association in St. Louis, in September, 1962, before Division 22, dealing with psychological aspects of disability.

Implication for Further Demonstrations

The group of clients under the category of Emotional Disorder as the primary handicap, as shown in Table Number 1, Appendix A, was the largest in number. Of this total group of ninety-nine persons, the post-psychotic clients numbered forty-eight. Unexpected success in placing them on jobs was revealed in the job follow-up survey with twenty-nine of them, or sixty percent, employed as follows:

	No.	Percent
Placed in full, stable employment	15	51
Worked most of the time, but on several jobs	3	10
Worked at least half possible time	1	.03
Occasional and/or temporary work	3	10
Sheltered employment	7	24

The apparent greater success in the Indianapolis Goodwill Industries demonstration than in the Jewish Vocational prototype program with post-psychotics, may be related to several variables. The Chicago program was of only eight-weeks duration, while the Indianapolis program was for twelve weeks. The additional four weeks in the Indianapolis project could have been significant. Also among the clients who were extended beyond the twelve-week program in Indianapolis, were psychotics who were extended to as many as twenty-four weeks in the program. One significant factor in successful adjustment of psychotics appears to be the extension of time of the adjustment training. Another is the close follow-up of clients placed on jobs, by the social, psychological and psychiatric services of Indianapolis Goodwill Industries.

The large number of referrals of post-psychotics into the project program from various agencies appears to indicate community need and interest in utilizing a sheltered workshop experience for patients who are being prepared to return to society.

The Need for a State-Wide Institute

The rehabilitation movement in Indiana received implementation by members of the project staff. The project psychologist, serving as the membership chairman for the National Rehabilitation Association, organized the first Indiana Chapter of that organization in the summer of 1960, and has since served as vice-president. The project director served as chairman of a section of the first Governor's Conference on Rehabilitation at Indiana University, in May, 1961, sponsored by the Indiana Commission for the Handicapped.

No college or university offers a sequence for training rehabilitation counselors in Indiana. There is no State organization of Sheltered Workshops. An Institute such as the one in 1960, at the Los Angeles State College, described by the report, "New Horizons for Workshops for the Handicapped" (10), was financed by a training grant by the Office of Vocational Rehabilitation, Department of Health, Education and Welfare. A similar undertaking in Indiana would bring together the directors of the workshops and provide an opportunity to develop guide lines and understandings of the broad principles of the rehabilitative responsibilities of the workshops, regardless of individual philosophy or operations.

The Concept of Adjustability

In the report of the prototype program (12), the following statement was made, "we now believe that the concept of vocational adjustment is a composite term, which includes three vocational competencies - employability, or capacity to function in a work setting; placeability, or the ability to adapt to the job".

The Jewish Vocational Service developed scales to measure employability and placeability, which were effectively used in the Indianapolis Goodwill Industries demonstration. However, no scale for measuring adjustability was developed. The Indianapolis Goodwill Industries experience was in agreement with the idea of the adjustability component being of equal significance with the concepts of employability and placeability. As no scale was utilized, this factor of adjustability was rated by descriptive terms of each client's behavior based on impressions of the supervisors of the client's relationships to co-workers and supervisors, ability to withstand work pressures, ability to accept job changes, and an estimation of the self-concept. The lack of more objective methods of determining adjustability offers opportunity for the development of objective devices for this purpose.

The Need for a Device to Measure Self-concept

Although no successful measure of the general area of self-concept was devised, it was markedly revealed in reports of counseling interviews, case conference discussions, social histories, school failures, and social and work failures that the handicapped individual has a sense of "difference" from other persons which interferes with his ability for total adjustment.

While this concept of feeling of "difference" is closely related to the prototype concept of "adjustability", it is thought that this is the subjective "side of the coin". A number of self-rating scales were unsuccessfully attempted, in order to measure this aspect of self-image but there is continuing hope that this particular research can be continued.

The final conclusion is that the demonstration project has provided new tools, opened new avenues and developed wider horizons for the rehabilitation of the handicapped within the Indianapolis Goodwill Industries.

APPENDIX A

STATISTICAL TABLES

TABLE 1.

PRESENTING PROBLEMS, BY FINAL EVALUATION, JOB FOLLOW-UP, TYPE OF PROGRAM, SEX OF CLIENT
(Primary) (All cases; N: 200)

Presenting Problem	Evaluation N	A	B	C	D	Job Follow-Up a	b	c	d	e	f	x	y	Type Program F	AT	Q	R	Sex M	F
1. MENTAL RETARDATION	27	1	1	8	17	3	3	1	5	6	6	2	1	15	2	3	7	21	6
a. Uncomplicated	18																		
2. EPILEPSY	26		5	12	9	8	4	2	3	4	2	3	0	18	1	3	4	19	7
a. Uncomplicated	4		3	0	1	2	2	0	0	0	0	0		2	1		1	4	
b. With mental retardation	2				2	1				0		1					2	1	1
c. With emotionality	11		1	6	4	3	2		3	1	1	1		8		3		7	4
d. With physical disability	9		1	6	2	2	0	2	0	3	1	1	0	8	0	0	1	7	2
3. EMOTIONAL DISORDER	99	5	21	37	36	30	15	3	6	15	11	14	5	56	13	17	13	64	35
a. Psychoneurosis	28	2	6	16	4	7	9	1	1	5	1	1	3	18	5	2	3	16	12
b. Psychoses	48	2	10	15	21	15	3	1	3	7	6	12	1	27	6	11	4	36	12
c. With behavioral problem	12	1	2	2	7	4	1	1	2	1	2		1	6	0	3	3	6	6
d. With mental retardation	11		3	4	4	4	2			2	2	1		5	2	1	3	6	5
4. PHYSICAL HANDICAP	48	1	14	15	18	12	7	2	8	8	6	2	3	28	6	11	3	29	19
a. Vision	4		1	2	1	1				2	1			2	2			2	2
b. Cardiac	2		1	1		1			1						1		1	2	0
c. Cerebral palsy	6		1	2	3	1	2		3					2		4		6	0
d. Brain damage	3			1	2			1		0	1		1	3				2	1
e. Deafness	7		1	2	4	1	1		2	2		1		4	2		1	4	3
f. Tubercular	4		1	1	2		3					1		3	1			2	2
g. Deformity	21	1	8	6	6	8		1	2	4	4		2	14		6	1	10	11
h. Diabetes	1		1				1									1		1	
TOTAL	200																		

LEGEND

EVALUATION

A: fully employable
B: employable within psychological and/or physical limitations
C: employable in sheltered job only
D: unemployable

TYPE OF PROGRAM

F: full twelve weeks
AT: administrative termination
Q: quit program
R: continued after twelfth week

JOB FOLLOW-UP

a: full, stable employment
b: worked most of time, but on several jobs
c: worked at least half possible time
d: only occasional and/or temporary work
e: sheltered employment
f: no employment
x: plan other than employment
y: no job follow-up available

TABLE 2.

EDUCATIONAL LEVEL, BY SEX OF CLIENT
(All cases; N: 200)

Educational Level	N	SEX	
		Male	Female
Ungraded classes	5	4	1
Primary grades	53	39	14
Some high school	73	46	27
High school diploma	48	28	20
Some college	17	13	4
College degree	4	3	1
TOTALS	200	133	67

Not significant

TABLE 3.

AGE OF CLIENTS, BY SEX

AGE INTERVALS	N	Male	Female
16 to 20	57	41	16
21 to 25	42	28	14
26 to 30	33	23	10
31 to 35	22	12	10
36 to 40	13	10	3
41 to 50	25	14	11
51 and over	8	5	3
TOTALS	200	133	67

Not significant

TABLE 4.

AGE VERSUS MARITAL STATUS BY SEX
(All cases; N: 200)

Age Groups	Single M	Single F	Married M	Married F	Separated or Divorced M	Separated or Divorced F
16 to 24	63	23	4	3	0	4
25 to 34	26	14	8	1	1	4
35 to 44	8	5	9	0	2	3
45 and over	4	4	5	1	3	5
TOTALS	101	46	26	5	6	16

Not significant

Legend
S Single
M Married
D Divorced or separated

TABLE 5.

WECHSLER ADULT INTELLIGENCE SCALE I. Q. (FULL SCALE) BY SEX OF CLIENT
(All cases: N: 200)

IQ Interval	N	Male	Female
50 through 69	17	12	5
70 through 84	56	36	20
85 through 109	102	67	35
110 through 125	21	15	6
126 and over	4	3	1
TOTALS	200	133	67

Not significant

TABLE 6.

AGE VERSUS MARITAL STATUS BY SEX
(All cases; N: 200)

Age Groups	Single Male	Single Female	Married Male	Married Female	Separated or Divorced Male	Separated or Divorced Female
16 to 24	63	23	4	3	0	4
25 to 34	26	14	8	1	1	4
35 to 44	8	5	9	0	2	3
45 and over	4	4	5	1	3	5
TOTALS	101	46	26	5	6	16

Not significant

TABLE 7.

PRIMARY DISABILITY AND SOURCE OF REFERRAL
(All cases; N: 200)

Source of Referral	Mental Retardation	Physical Disability	Epilepsy	Emotional Disturbance (Psychoneurotic or Psychotic)	Total
State Division Vocational Rehabilitation	11	21	8	19	59
Goodwill Industries	10	13	5	14	42
Veterans Administration (Hospitals and Counseling Center)	1	0	6	13	20
Hospitals (State and General)	1	2	2	23	28
Other sources (social agencies, clinics, churches and private physicians)	4	12	5	30	51
TOTALS	27	48	26	99	200

TABLE 8.

PREVIOUS WORK EXPERIENCE AND EVALUATION BY SEX
(All cases; N: 200)

PREVIOUS WORK EXPERIENCES	EVALUATION CATEGORIES						
	A	B	C	D	Tot. M.	Tot. F.	Total all Categories
With Work Experience	M. 3 F. 4 7	M.19 F. 13 32	M. 40 F. 20 60	M. 45 F. 15 60	107	52	159
Without Work Experience	0	M. 4 F. 5 9	M. 8 F. 4 12	M. 14 F. 6 20	26	15	41
TOTALS	7	41	72	80			200

Not significant

TABLE 9.

FINAL EVALUATION, ACCORDING TO SEX
(All cases; N: 200)

	EVALUATION CATEGORIES				
Sex of Client	A	B	C	D	TOTALS
Male	3	22	48	59	132
Female	4	20	23	21	68
TOTALS	7	42	71	80	200

Not significant

TABLE 10.

WECHSLER ADULT INTELLIGENCE SCALE I.Q. AND EVALUATION
(All cases; N: 200)

I.Q. GROUPS	EVALUATION CATEGORIES A	B	C	D	TOTALS
50 through 69	0	1	9	7	17
70 through 84	2	10	17	27	56
85 through 105	4	25	37	36	102
106 and over	4	5	6	10	25
TOTALS	10	41	69	80	200

Not significant

LEGEND

- A. Fully employable
- B. Employable within physical or psychological limitations
- C. Employable in sheltered workshop.
- D. Unemployable

TABLE 11.

AGE VERSUS EVALUATION
(All cases; N: 200)

Age groups	EVALUATION CATEGORIES A	B	C	D	TOTALS
16 to 24	3	17	37	43	100
25 to 34	1	14	16	21	52
35 to 44	2	3	13	8	26
45 and older	2	7	6	7	22
TOTALS	8	41	72	79	200

Not significant

LEGEND

- A. Fully employable
- B. Employable within physical or psychological limitations
- C. Employable in sheltered workshop
- D. Unemployable

TABLE 12.

EDUCATION AND EVALUATION
(All cases; N: 200)

	EVALUATION CATEGORIES OF EMPLOYABILITY				
Educational level	A	B	C	D	TOTALS
Ungraded	0	1	2	3	6
Primary grades	3	7	24	22	56
Some High School	4	18	20	32	74
High School diploma and College experience	0	15	26	23	64
TOTALS	7	41	72	80	200

Not significant

LEGEND

A. Fully employable
B. Employable within physical
or psychological limitations
C. Employable in sheltered workshop
D. Unemployable

TABLE 13.

AGE VERSUS JOB FOLLOW-UP
(All cases; N: 200)

FOLLOW-UP CATEGORIES

Age Groups	a and b	c and d	e and f	x and y	TOTALS
16 to 24	(27) (15) 42	(3) (11) 14	(16) (12) 28	(8) (8) 16	100
25 to 34	(17) (7) 24	(4) (6) 10	(8) (6) 14	(6) (1) 7	55
35 to 44	(5) (6) 11	(1) (3) 4	(2) (3) 5	(3) (0) 3	23
45 and over	(4) (1) 5	(0) (2) 2	(7) (4) 11	(4) (0) 4	22
TOTALS	82	30	58	30	200

Not significant

LEGEND

a. full, stable employment

b. worked most of time, on several jobs

c. worked at least half possible time

d. only occasional and/or temporary work

e. sheltered employment

f. no employment

x. plan other than employment

y. no follow-up available

TABLE 14.

JOB FOLLOW-UP BY SEX
(All cases; N: 200)

Sex of Client	JOB FOLLOW-UP CATEGORIES a and b	c and d	e and f	x and y	TOTALS
Male	(39) (21) 60	(8) (11) 19	(18) (15) 33	(15) (6) 21	133
Female	(14) (8) 22	(0) (11) 11	(15) (10) 25	(6) (3) 9	67
TOTALS	(53) (29) 82	(8) (22) 30	(33) (25) 58	(21) (9) 30	200

Not significant

TABLE 15.

PREVIOUS WORK EXPERIENCE AND EVALUATION BY SEX
(All cases; N: 200)

PREVIOUS WORK EXPERIENCES	FINAL EVALUATION CATEGORIES A		B		C		D		ALL CATEGORIES Male	Female	TOTALS
	M.	F.	M.	F.	M.	F.	M.	F.			
With Work Experience	3	4	19	13	40	20	45	15	107	52	159
	7		32		60		60				
Without Work Experience	0	0	4	5	8	4	14	6	26	15	41
	0		9		12		20				
TOTALS	7		41		72		80				200

Not significant

TABLE 16 - 1

WECHSLER ADULT INTELLIGENCE SCALE I.Q. AND JOB FOLLOW-UP
(All cases; N: 200)

FOLLOW-UP CATEGORIES

I.Q. GROUP	a and b	c and d	e and f	x and y	TOTALS
50 - 69	(4 - 3) 7	(1 - 1) 2	(2 - 6) 8	(0) 0	17
70 - 84	(9 - 4) 13	(3 - 8) 11	(12 - 8) 20	(5 - 3) 8	52
85 - 105	(24 - 18) 42	(4 - 11) 15	(15 - 11) 26	(10 - 4) 14	97
106 and over	(16 - 3) 19	(1 - 2) 3	(3 - 1) 4	(6 - 2) 8	34
TOTALS	81	31	58	30	200

Chi-Square = 18.848 $p < .05 = 16.91$
Significant $p \quad .05 = 32.67$

TABLE 16 - 2

WECHSLER ADULT INTELLIGENCE SCALE I.Q. AND JOB FOLLOW-UP
(All cases; N: 200)

PERCENTAGE OF EACH FOLLOW-UP CATEGORY AT VARIOUS I.Q. LEVELS

I.Q. Level	a and b	c and d	e and f	x and y	
50 - 69	.086	.065	.138	0	
70 - 84	.160	.355	.345	.267	
85 - 105	.519	.484	.448	.467	
106	.235	.096	.069	.267	

24% of the subjects in categories a and b, had an I.Q. of 106 or more.
75% of the subjects in categories a and b, had an I.Q. of 85 or more.

TABLE 17.

RELATION BETWEEN EVALUATION AND JOB FOLLOW-UP

(Cases who completed program; N: 159)

EVALUATION CATEGORIES	JOB FOLLOW-UP CATEGORIES								TOTALS	PERCENT OF TOTAL SAMPLE
	a	b	c	d	e	f	x	y		
A	2	0	0	2	1	0	2	0	7	.044
B	15	7	1	3	12	3	1	0	42	.264
C	25	13	2	7	17	5	4	3	76	.478
D	4	3	3	8	4	4	4	4	34	.214
TOTALS	46	23	6	20	34	12	11	7	159	

Legend

A. Fully Employable
B. Employable within physical or psychological limitations
C. Employable in sheltered workshop
D. Not employable

Chi-Square = 34.26

p .05 = 32.67
Significant

a: full, stable employment
b: worked most of time, but on several jobs
c: worked at least half possible time
d: only occasional and/or temporary work
e: sheltered employment
f: no employment
x: plan other than employment
y: no follow-up available

TABLE 18.

CLIENTS WHO LEFT THE PROGRAM BEFORE 12 WEEKS, ACCORDING TO JOB FOLLOW-UP

(Clients N: 41)

REASON	TOTALS	JOB-FOLLOW-UP CLASSIFICATION							
		a	b	c	d	e	f	x	y
TO TAKE A JOB	13	3	5	0	5	0	0	0	0
FOR HOSPITALIZATION	9	1	0	0	0	0	1	7	0
EXECUTIVE DECISION To Marry 1 Self Decision 2 Unable to benefit 16	19	0	0	0	0	0	14	1	4
TOTALS	41	4	5	0	5	0	15	8	4

TABLE 19.

JOB PLACEMENTS, BY OCCUPATIONAL GROUPINGS

Professional Occupations 4

Teacher-Grade School
Nurse
Musician
Mathematician

Clerical Occupations 19

Clerk-Typist
General Office Clerk
Receptionist
Shipping Clerk
PBX Operator
Stock Clerk
Food Storeroom Man
Account Clerk
Order Clerk
Medical Records Clerk
Telephone Order Clerk
Order Filler
Inventory Clerk
Service Clerk
Cashier
Mail Sorter
Sample Distributor
Traffic Enumerator
Counter Clerk (Dry Cleaning)

Sales Occupations 8

Telephone Solicitor, Sales Clerk, Salesperson, (Furniture, Electrical Appliance, Jewelry, House-to-house) Routeman, Newspaper Carrier.

Domestic Service Occupations 2

Baby Sitter, Yardman

Personal Service Occupations 15

Sandwich Man, Waitress, Car Hop, Dishwasher, Bootblack, Bellboy, Orderly, Cafeteria Helper, Cook Helper, Ward Attendant, Nurse Aid, Bus Girl or Bus Boy, Soda Dispenser, Short Order Cook, Counter Girl, Cafeteria.

Protective Service Occupation 1

Watchman

Building Service Worker Occupations 6

Janitor, Maintenance Helper, Porter, Wall Washer, Elevator Operator, Apartment Maintenance Man.

Agricultural Occupations 2

Farm Hand, Kennelman

Horticultural Service Occupations 2

Nursery Laborer, Groundskeeper

JOB PLACEMENTS BY OCCUPATIONAL GROUPINGS - continued

Skilled Occupations 6

Auto Mechanic, Gun Stock Maker, Plant Maintenance Man, Meat Cutter, Shoe Repairman, Interior Painter.

Semi Skilled Occupations 24

Roll Icer
Pressing Machine Operator
Transformer Mounter
Ironer, Hand
Service Station Attendant
Power Sewing Machine Operator
Parking Lot Attendant
Small Electrical Appliance Repairman
Dry Cleaning Inspector
Shirt Finisher
Clothing Sorter
Whip Braider
Mixing Machine Operator
Vending Machine Repairman
Upholsterer Helper
Spray Painter
Burr Tumbler Operator
Truck Driver, Light
Hardwood Floor Layer Helper
Washing Machine Operator
Auto Mechanic Helper
Cabinet Maker Apprentice
Jewelry Assembler
Silk Screen Printer

Learner and Trainee Occupations 7

Service Station Attendant
Cabinet Maker, Maintenance
Pressing Machine Operator
Film Developer
Turret Lathe Operator
Small Electrical Appliances Repairman
Locomotive Fireman

Unskilled Occupations 39

Painter Helper
Warehouseman
Off Bearer
Measurer, Garment
Hardware Sorter
Conveyor Belt Loader
Packer, Carton
Furniture Sander
Truck Unloader
Park Maintenance Helper
Telephone Directory Distributor
Small Housewares Sorter
Trucker, Hand
Freight Car Unloader
Can Filler, Hand
Condenser Assembler
Attacher, Price Tag
Wallpaper Steamer
Handyman
Styrofoam Cutter
Bag Stamper
Degreaser
Box Maker
Carpenter Helper
Sample Assembler
Skating Rink Helper
Tree Trimmer Helper
Stock Yards Laborer
Freight Handler
Paper Salvage Man
Construction Laborer
Baling Machine Operator
Shaker, Flatwork
Stock Boy
Salvage Sorter
Vegetable Sorter
Metal Sorter
Truck Driver Helper
Assembler, Hand

TABLE 20.

SOURCE OF REFERRALS OF CLIENTS BY FINAL EVALUATION AND JOB-FOLLOW-UP

(All cases; N: 200)

SOURCE OF REFERRAL	FINAL EVALUATIONS				JOB FOLLOW-UP CATEGORIES								TOTALS
	A	B	C	D	a	b	c	d	e	f	x	y	
Division of Vocational Rehabilitation	4	9	28	22	14	9	2	9	12	9	5	3	63
Goodwill Industries (at intake or from shop departments)	2	6	17	17	9	5	2	8	6	6	2	4	42
Veterans Administration (Hospital or Counseling Center)	0	1	7	12	3	2	0	2	1	3	7	2	20
Hospitals General Hospital - 12 State Hospitals - 13 Private Hospitals - 5	1	9	8	12	8	3	1	5	6	4	3	0	30
Social Agencies Catholic Charities - 8 Family Service - 7 Jewish Social Service - 1 Dept. Public Welfare - 2 S. W. Com. Assn. - 1 Knightstown Home - 1 Agency for the Blind - 1 Muscular Dystrophy Foun. - 1	0	12	7	3	7	5	0	0	5	4	0	1	22
Court	0	0	1	3	1	0	0	1	1	0	0	1	4
Private Physicians	0	1	2	2	1	3	0	1	0	0	0	0	5
Mental Health Association	0	2	2	0	1	0	0	0	2	0	1	0	4
Churches	0	1	1	0	2	0	0	0	0	0	0	0	2
Other Sources	0	1	3	4	3	1	0	0	3	1	0	0	8
TOTAL	7	42	76	75	49	28	5	26	36	27	18	11	200

Not significant

Legend:
A. Fully Employable
B. Employable within physical or psychological limitations
C. Employable in sheltered workshop
D. Not employable

a. Full, stable employment
b. Worked most of time, but on several jobs
c. Worked at least half possible time
d. Only occasional and/or temporary work

e. Sheltered employment
f. No employment
x. Plan other than employment
y. No job follow-up available

TABLE 21.

PRIMARY DISABILITY BY AGE OF CLIENT
(N: 200)

PRIMARY HANDICAP	AGE INTERVALS 16-20	21-25	26-30	31-35	36-40	41-50	51 & over	TOTAL
MENTAL RETARDATION	13	7	3	1	2	1	0	27
EPILEPSY	6	8	4	4	0	4	0	26
EMOTIONAL DISORDER	26	14	16	16	9	12	6	99
PHYSICAL HANDICAP	12	15	8	1	2	8	2	48
TOTALS	57	44	31	22	13	25	8	200

Not significant

TABLE 22.

PRIMARY DISABILITY BY SEX OF CLIENT
(N: 200)

PRIMARY HANDICAP	MALE	FEMALE	TOTAL
MENTAL RETARDATION	21	6	27
EPILEPSY	19	7	26
EMOTIONAL DISORDER	64	35	99
PHYSICAL HANDICAP	29	19	48
TOTAL	133	67	200

Not significant

TABLE 23.

PRIMARY DISABILITY BY INTELLIGENCE QUOTIENT
(N: 200)

PRIMARY HANDICAP	I. Q. INTERVALS					TOTAL
	50-69	70-84	85-109	110-125	126 & over	
MENTAL RETARDATION	11	14	2*	0	0	27
EPILEPSY	2	11	12	1	0	26
EMOTIONAL DISORDER	3	19	55	18	4	99
PHYSICAL HANDICAP	1	12	33	2	0	48
TOTALS	17	56	102	21	4	200

Chi-Square = 72.99319
$p < .001$ Highly significant

* Two subjects accepted with primary disability of Mental Retardation were found to be socially retarded, and on previous tests to be feebleminded, although the test score on the WAIS gave them an I.Q. of 85, and are for the purpose of this Table, listed among the Mentally Retarded.

TABLE 24.

CHIEF HANDICAPS OF CLIENTS WHO COMPLETED TWELVE WEEKS PROGRAM BY EVALUATION CATEGORIES AND JOB FOLLOW-UP

(Cases who completed program; N: 159)

CHIEF HANDICAPS	EVALUATION CATEGORIES				JOB FOLLOW-UP								TOTALS
	A	B	C	D	a	b	c	d	e	f	x	y	
MENTAL RETARDATION	1	1	9	12	2	2	1	5	6	5	1	1	23
EPILEPSY	0	5	13	7	6	4	1	3	5	2	3	1	25
EMOTIONAL DISORDER	5	22	39	9	28	12	3	5	15	3	5	4	75
PHYSICAL HANDICAP	1	14	15	6	11	3	1	6	8	5	1	1	36
TOTALS	7	42	76	34	47	21	6	19	34	15	10	7	159

Chi-Square = 24.36
Significance
P.05 = 16.91
P.01 = 21.66

Chi-Square = 20.90
P.05 = 32.67

LEGEND

EVALUATION

A: fully employable
B: employable within physical and/or psychological limitations
C: employable in sheltered job only
D: unemployable

JOB FOLLOW-UP

a: full stable employment
b: worked most of time but on several jobs
c: worked at least half possible time
d: only occasional and/or temporary work
e: sheltered employment
f: no employment
x: plan other than employment
y: no job follow-up available

TABLE 25.

EVALUATION RATING COMPARED TO JOB FOLLOW-UP RATING AT ONE YEAR AFTER LEAVING THE PROGRAM

(N: 146)

(This group includes 5 clients who left the program before the end of twelve weeks to take jobs)

JOB FOLLOW-UP RATING	EVALUATION RATING				TOTAL
	A	B	C	D	N
		(percentages)			
a and b	.03	.39	.44	.14	(36 clients)
c and d	.02	.15	.37	.46	(46 clients)
e and f	.06	.17	.36	.41	(64 clients)
					146 clients

LEGEND

A. Fully Employable
B. Employable within physical or psychological limitations
C. Employable in sheltered workshop
D. Not employable

a. Full, stable employment
b. Worked most of time, but on several jobs
c. Worked at least half possible time
d. Only occasional and/or temporary work
e. Sheltered employment
f. No employment

TABLE 26.

EVALUATION RATING COMPARED TO JOB FOLLOW-UP RATING AT TWO-YEAR PERIOD FOLLOWING COMPLETION OF PROGRAM

(N: 96)

JOB FOLLOW-UP RATING	EVALUATION RATING				TOTAL
	A	B	C	D	N
	(percentages)				
a and b	.06	.28	.46	.20	50
c and d	.11	.17	.28	.44	18
e and f	.00	.25	.32	.43	28
					96

LEGEND

A. Fully Employable	a. Full, stable employment
B. Employable within physical or psychological limitations	b. Worked most of time, but on several jobs
C. Employable in sheltered workshop	c. Worked at least half possible time
D. Not employable	d. Only occasional and/or temporary work
	e. Sheltered employment
	f. No employment

TABLE 27.

CHANGES IN EMPLOYMENT STATUS AS REFLECTED IN JOB FOLLOW-UP CONTACTS OVER THREE YEARS OF CLIENTS WHO ENTERED THE PROGRAM THE FIRST YEAR

(N: 55)

FINAL RATING THIRD YEAR	TOTAL NUMBER	FINDINGS IN FIRST YEAR FOLLOW-UP JOB RATING Lower	Same	Higher	FINDINGS IN SECOND YEAR FOLLOW-UP JOB RATING Lower	Same	Higher
a	13	8	5	0	5	8	0
b	11	6	4	1	5	4	2
c	2	1	0	1	2	0	0
d	5	2	3	0	4	0	1
e	7	0	7	0	0	7	0
f	6	0	6	0	0	6	0
x	8	0	5	3	0	5	3
y	3	0	1	2	0	3	0
TOTALS	55	17	31	7	16	33	6

LEGEND

a. Full stable employment
b. Worked most of the time but on several jobs
c. Worked at least half possible time
d. Only occasional and/or temporary work
e. Sheltered employment
f. No employment
x. Plan other than employment
y. No job follow-up available

TABLE 28.

CLIENTS RECEIVING THE JOB FOLLOW-UP "x" RATING BY EVALUATION PREDICTION OF STAFF

(N: 21)

("x" rating refers to "Plan other than employment")

GROUP OF CLIENTS	REASON FOR LEAVING			EVALUATION				TOTAL
	Hospitalized	Married	Died	A	B	C	D	N
First Year	8	0	1	0	0	0	9	9
Second Year	4	1	0	0	1	2	2	5
Third Year	4	0	0	0	0	1	3	4
Fourth Year	3	0	0	0	0	0	3	3
TOTAL	19	1	1	0	1	3	17	21

Of the 19 clients who were hospitalized, 17 were mental patients who regressed and were returned to the hospital for further treatment, 2 became disturbed and were referred for psychiatric treatment and were immediately hospitalized. One client died after being placed on a job and one client married immediately upon completing the program.

LEGEND

A. Fully employable
B. Employable within physical or
   psychological limitations
C. Employable in sheltered workshop
D. Unemployable

TABLE 29.

CLIENTS RETAINED FOR EIGHT TO TWELVE ADDITIONAL WEEKS IN THE PROGRAM
N: 10

PRIMARY DISABILITY	EVALUATION RATINGS OF EMPLOYABILITY AND PLACEABILITY		FINAL FOLLOW-UP RATING OF JOB
	12 Weeks	After Additional Weeks	
Psychoneurosis	C-3	A-1	e
Mental retardation	D-4	D-4	f
Psychoneurosis with Mental Retardation	D-4	B-2	e
Mental Retardation	C-3	C-4	e
Psychoneurosis Post Poliomyelitis	C-3	C-4	d
Schizophrenic Reaction Undifferentiated type	C-4	C-3	a
Schizophrenic Reaction Paranoid type	D-4	D-4	f
Schizophrenic Reaction Hebephrenic type	D-4	C-3	d
Epilepsy and Pcychoneurosis	C-3	C-3	a
Schizophrenic Reaction Paranoid type	D-4	C-4	a

LEGEND

A. Fully employable
B. Employable within physical or psychological limitations
C. Employable in sheltered workshop
D. Unemployable

a. Full stable employment
b. Worked most of the time but on several jobs
c. Worked at least half possible time
d. Only occasional and/or temporary
e. Sheltered employment
f. No employment

APPENDIX B

FORMS AND RATING SCALES

INDIANAPOLIS GOODWILL INDUSTRIES
PROJECT STATISTICAL RECORD

NAME ____________________ AGE ________ SEX ________

ADDRESS ____________________ STARTING DATE ________

REFERRAL AGENCY ____________________ PROJECT COUNSELOR ____________________

SPECIAL GOALS ____________________

PREVIOUS EMPLOYMENT (Jobs, years, months) ____________________

____

____

WHEN LAST EMPLOYED (date) ____________________

TEST FINDINGS
WAIS IQ FS ________ VS ________ PS ________
Other tests administered

____

TERMINATION Date ____________________

Check Reason for Termination

Scheduled program completed ____________ Quit before completion ____________

Administrative termination ____________ Other (explain) ____________

____

EMPLOYABILITY EVALUATION A B C D rating (circle one)

REMARKS ____________________

____

____

____

____

250L-1

INDIANAPOLIS GOODWILL INDUSTRIES

PROJECT WEEKLY GUIDE FOR VOCATIONAL PATTERN

Applicant ______________________

Date ______________________

Supervisor ______________________

To be filled out at ends of 1st and 2nd weeks. Relevant items to be indicated under #3 on Job Unit Sheet.

I. Reaction to Supervision

a. ______ Requires matter-of-fact supervision

b. ______ Requires authoritative control

c. ______ Requires more than normal amount of supervision

d. ______ Requires only normal amount of supervision

e. ______ Resists supervision, but is able to perform

f. ______ Requires emotional support from supervisor

g. ______ Cannot accept supervision

REMARKS: (encircle appropriate comment)
Depends on supervision to enable him to work; sulks, gets angry, used to better job; wants to please.

II. Relations to Co-Workers

a. ______ Relates actively to others; easily becomes part of group

b. ______ Tends to shun contacts; keeps mostly to himself

c. ______ On fringe of group; physically there, but not really a participant.

d. ______ Avoids interpersonal contacts; an isolate

e. ______ Friendly; outgoing; popular

f. ______ Aggressive toward others, provocative; quarrelsome; irritable

g. ______ Passive toward others; shuns arguments

h. ______ Essentially a leader in group

i. ______ Essentially a follower in group

REMARKS: (Encircle appropriate comments)
Controlled - impulsive; talkative - quite; relates - withdrawal; provocative; helpful - competitive;

III. Work Satisfaction

a. ______ Positive attitudes to work; derives satisfaction from working

b. ______ Negative attitudes to work; work is distasteful

c. ______ Neutral attitudes to work; works because he must

d. ______ Needs encouragement in order to work at capacity

e. ______ Needs prodding in order to work at capacity

f. ______ Will not work at capacity under any shop conditions

g. ______ Works to capacity without special treatment

REMARKS: (Encircle appropriate comments)

Does more poorly on tasks he doesn't like.

IV. Work Pressures

a. ______ Output at an industrial level

b. ______ Output meets shop average

c. ______ Output below shop average

d. ______ Can respond to pressure for increased output

e. ______ Cannot respond to pressure for increased output

f. ______ Cannot sustain increased output under pressure

g. ______ Output deteriorates under pressure for more output

h. ______ Quality satisfactory

i. ______ Can improve quality under pressure to do so

j. ______ Cannot improve quality under pressure to do so

k. ______ Cannot sustain improvement in quality under pressure to do so

l. ______ Quality deteriorates under pressure for greater output

m. ______ Dislikes routine work; needs activity and change of scene

n. ______ Accepts routine work

o. ______ Is flexible, responds to emergencies and changes of work routine

p. ______ Is rigid, uncomfortable if asked to change work unexpectedly

q. ______ Consistent worker; maintains even pace

r. ______ Inconsistent in output

REMARKS:

What kind of work can he perform adequately within a possible placeable area?

What kinds of tasks elicit poor performance?

In what kinds of tasks can he profit from training?

Behavior: (encircle appropriate comments)

Voice delusions; has seizures; works steadily; distractable; handles complex tasks - handles only single tasks; tries to learn

V. Use of Abilities

a. ______ Functions at skill level

b. ______ Functions below level of skill

c. ______ Utilizes capacities fully only under special conditions in relation to:

______ supervision

______ co-workers

______ work pressures

REMARKS:

VI. Concept of self as a worker

a. ______ Accepts role as a productive worker

b. ______ Regards work as distasteful, but has to be done

c. ______ Role of worker is not understood

d. ______ Confidence in ability to work

e. ______ Lack of confidence in ability to work

f. Conceives self as a

______ Professional or managerial worker

______ White collar worker

______ Manual worker

REMARKS: (encircle appropriate comments)

Regular attendance - irregular attendance; conforms to work rules - violates work rules; takes GWI seriously - comes to GWI only because he has to; takes GWI as a place to socialize.

INDIANAPOLIS GOODWILL INDUSTRIES, INC.
Project Employee's Weekly Job Appraisal

Name:____________________ Supervisor:________________ Date:__________ A.M._______ P.M._______

Type of Supervision: (Check One) ____ Permissive ____ Supportive ____ Matter-of-fact ____ Firm ____ Authoritative ____ Controlling

Type of work situation: (Check One) ____ Individual task (Working alone) ____ Individual task (Working in a group) ____ Group task (Assembly-line type)

Production Record

Job Title	Operation	Hours Worked	Pieces Worked	Out-put Per hour	Norm	Ratio To Norm	Quality of Work

Worker's Behavior & Performance on the Job (Movement Identification):

250L- 12A

INDIANAPOLIS GOODWILL INDUSTRIES

50 - N

PROJECT WEEKLY PRODUCTION RECORD

Name________________________________ Clock # ____________ Week Ending________________

DATE	DEPT.	ON	OFF	ORD. #	OPERATION	OPR. #	NO. PCS.	RATE	HRS.	WAGES
							TOTALS			

260-G

INDIANAPOLIS GOODWILL INDUSTRIES, INC.
Project Employee's Daily Job Appraisal

Name________________ Supervisor________________ Date__________ to__________

Type of Supervision: (Check One) ____ Permissive ____ Supportive ____ Matter-of-fact ____ Firm ____ Authoritative ____ Controlling

Type of work situation: (Check One) ____ Individual task (Working alone) ____ Individual task (Working in a group) ____ Group task (Assembly-line type)

Production Record

Date	Job Title	Operation	Hours Worked	Pieces Worked	Out-put Per hour	Norm	Ratio To Norm	Quality of Work

Worker's Behavior & Performance on the Job (Movement Identification):________________

____

____

INDIANAPOLIS GOODWILL INDUSTRIES

DEMONSTRATION PROJECT

WEEKLY CLIENT EVALUATION

Client

Date

Week No.

Productivity -

Job	Ratio	Job	Ratio

Quality of Work:

Reactions to Supervision:

Relations to Co-Workers:

Work Attitudes: (motivation, use of energies, self-concept, etc.)

Client as a Worker: (assets and liabilities)

Evaluation:

Employability	A	B	C	D
Placeability	1	2	3	4

Remarks:

INDIANAPOLIS GOODWILL INDUSTRIES
DEMONSTRATION PROJECT

REPORT OF PROJECT EVALUATION

Date______________________

Name of Client____

Recommended by____

Diagnosis: ____

A. Primary_____________________________________

B. Secondary___________________________________

HISTORICAL BACKGROUND

Age____________ Race _______________ Height_____________ Weight ___________

Education: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

Marital Status: S_____ M_____ SEP_____ DIV_____ WID______

Previous Employment Experience (List by type)

A.________________________________ Length of time ________________________

B.________________________________ Length of time ________________________

C.________________________________ Length of time ________________________

SPECIFIC PROBLEM

Physical Limitation:__________________________________

A. Upper Extremity___________________________________

B. Lower Extremity___________________________________

C. Sight____

D. Hearing____

E. Other____

Mental Ability:

____

250L-21

FACTORS OBSERVED DURING EVALUATION PERIOD

I. General Characteristics: (check appropriate description)

A. Dress	a) appropriate for job b) neat and clean	c) untidy d) dirty e) other:
B. Personal hygiene	a) hair & nails well groomed b) clean	c) clean shaven d) no offensive body odor e) other:
C. Voice	a) pleasing voice b) resonant voice	c) too soft to be heard d) rasping e) other:
D. Personality	a) outgoing b) reserved but friendly	c) moody at times d) irritable e) other:
E. Ability to relate to others	a) relates with ease and confidence b) somewhat reserved, fearful, unsure of self	c) responds only when spoken to d) withdrawn e) other:
F. Work motivation	a) well motivated, makes good use of energies b) motivated but cannot utilize skills due to fear, anxiety, preoccupation	c) ambivalent about work d) lazy at times e) other:

II. Work Habits:

A. Attendance	a) consistently on time & on the job b) usually prompt but occasionally absent	c) tardy occasionally but usually present d) often late & absent e) other:
B. Ability to follow instructions	a) learns rapidly and follows instructions carefully b) learns rapidly, forgets easily	c) slow learner, requires repeated instruction but learns d) fails to follow through, undependable e) cannot learn
C. Quality of work	a) consistently good on complex & simple tasks b) irregular, sporadic	c) consistently good only on simple tasks d) consistently poor on all tasks e) other:

D. Quantity of work	a) exceeds workshop standard b) usually meets workshop standard - 75-100%	c) consistently below workshop standard-50-60% d) 50% or less of workshop standard e) other:

III. Motor Skills & Coordination

A. Use of hands	a) very skillful b) fairly adept	c) poorly coordinated d) very limited e) other:
B. Use of arms	a) very skillful b) fairly adept	c) poorly coordinated d) very limited e) other:

IV. Other Abilities

A. Reading	Grade level	____________________
B. Writing	a) excellent b) good	c) fairly legible d) illegible e) other:
C. Arithmetic	Grade level	____________________
D. Verbal expresion	a) very verbal b) some ability	c) speaks haltingly d) almost mute e) other:

Check the appropriate ratings for this client and include remarks under each.

V. Employability:	Placeability:
A. Fully employable	1. Placement relatively easy
B. Employable within physical limits	2. Placement somewhat difficult
C. Employable only in sheltered situation	3. Placement only with difficulty
D. Unemployable	4. Unplaceable

VI. What particular problems did you encounter during this period?

VII. What hazards or temptations should be avoided in placing this client?

VIII. Has client indicated any special interests or desires as to type of employment?

Dear Friend:

We would like to ask you a special favor.

In order to improve our Demonstration Project, we are in urgent need for information which will help us to determine how worthwhile this program has been. If you and every Project graduate would kindly give a few minutes of serious thought to the enclosed questionnaire, you will be performing a real service to Goodwill Industries.

It is important that each question be answered as completely as possible. If you need help with the questionnaire please ask a parent or relative or friend to help you with this. Please give further explanation on the back of the sheet, when necessary.

We are enclosing a self-addressed, stamped envelope for your convenience. Please do everything in your power to return the completed form to us as quickly as possible. We would like to have it back not later than five days after you receive it. The best way to do this is to complete it as soon as you get it and drop it in the mail right away.

Thank you for being so helpful.

Sincerely yours,

Paul Schmidt

Paul Schmidt
Project Director

P. S. Let us know if we can be of further help to you.

PS: dc

enc.

FOLLOW-UP STUDY
INDIANAPOLIS GOODWILL INDUSTRIES
DEMONSTRATION PROJECT WORKERS

Date____________________
Phone____________________

Your Name______________________________ Address______________________________

1. Are you now employed? Yes ________ No ________ Temporarily ________ Full time ________
Part time ________ Regularly ________.

If yes, Name of firm ____________________ Address ____________________

What type of job are you doing? ______________________________

Date you started on this job ____________________ Earnings (per week or hourly) ____________

2. How did you get this job? (check answer below):

Through the Vocational Rehabilitation Division ____________
Through the Employment Security Division........ ____________
From a newspaper ad .... ____________
Through a friend.. ____________
On your own effort .... ____________
Through Goodwill Industries .... ____________

3. List each additional job you have had since leaving Goodwill industries and the starting date, the ending date, reason it ended, and wages earned (hourly or weekly):

FIRM NAME	JOB	DATE STARTED	DATE ENDED	WAGE RATE	REASON JOB ENDED

(Continue on back side if necessary)

4. List names of firms where you have applied for work and dates on which you applied since leaving Goodwill Industries. (If you do not know the date, the month and year will help)

NAME OF FIRM	DATE YOU APPLIED	NAME OF FIRM	DATE YOU APPLIED

5. If you do not have a job, are you still looking for one? Yes________ No________. If not, check one of the following:

Married and out of labor market__________
Have had a long illness__________
Have returned to school__________
Am receiving training__________
Other (explain)______________________________

6. Did the 12 week program at Goodwill help you? Yes________ No________. (Please Explain):

____

7. What help would you have liked but did not receive?

____

(Please use other side for additional comments.)

INDIANAPOLIS GOODWILL INDUSTRIES
Demonstration Project

Follow-up Record of Employment History

130-B

Client's Name____________________
Registration No.____________________
Address____________________
Special Notes____________________

Telephone No.____________________
Principal handicap____________________
Date of Birth____________________

Date follow-up period begins____________________
Eligible for service: Yes_____ No_____
Counselor's Name____________________

	Ending Date: 1st Qtr. - 3 months	Ending Date: 2nd Qtr. - 6 months	Ending Date: 3rd Qtr. - 9 months	Ending Date: 4th Qtr. - 12 months
*Filled out by: name and date				
1. Placement	JOB NUMBER 1 | 2 | 3 | 4 | 5 | 6	JOB NUMBER 1 | 2 | 3 | 4 | 5 | 6	JOB NUMBER 1 | 2 | 3 | 4 | 5 | 6	JOB NUMBER 1 | 2 | 3 | 4 | 5 | 6
1. Not placed				
2. Placed by				
3. Placed by self				
4. Placed by other Agency				
2. Out of labor market & sample:				
reason and date:				
3. Referrals: ___ number of referrals in follow-up qtr. if not placed in that qtr.				
4. Placement activity by IGI for entire quarter				
1. High				
2. Moderate				
3. Low				
4. None				
5. Placement activity by client excluding first 30 days of availability (in first quarter or after loss of job in any quarter.)				
1. High				
2. Moderate				
3. Low				
4. None				
*Principal Source of Information:				

Employment History Follow-up

Client:____

		Ending Date: 1st Qtr. - 3 months	Ending Date 2nd Qtr. - 6 months	Ending Date: 3rd Qtr. - 9 months	Ending Date: 4th Qtr. - 12 months
6. Name of firm (abbreviate if needed) and job number	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
7. Job title or duties and job number	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
8. Duration: starting and ending dates	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
9. Salary	1.				
	2.				
	3.				
	4.				
	5.				
	6.				

Client ____________________

	Ending Date: 1st Qtr. - 3 months						Ending Date: 2nd Qtr. - 6 months						Ending Date: 3rd Qtr. - 9 months						Ending Date: 4th Qtr. - 12 months					
	JOB NUMBER						JOB NUMBER						JOB NUMBER						JOB NUMBER					
	1	2	3	4	5	6	1	2	3	4	5	6	1	2	3	4	5	6	1	2	3	4	5	6
10. Limitations of employment:																								
1. Full-time regular																								
2. Part-time regular																								
3. Temporary																								
4. Sheltered institution																								
5. Sheltered family																								
11. Client's reason for loss of job:																								
1. Still employed																								
2. Temporary																								
3. Competence																								
4. Adjustment																								
5. Competence & Adjustment																								
6. Other (explain here)																								
12. Employer's reason for loss of job:																								
1. Still employed																								
2. Temporary																								
3. Competence																								
4. Adjustment																								
5. Competence & Adjustment																								
6. Other (explain here)																								
Supplementary Notes																								

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